

## RESPONSE SIGNATURE PAGE

Type or Print the following information.

PROSPECTIVE CONTRACTOR'S INFORMATION				
Company:	Gateway Sight & Sound			
Address:	1618 Browns Lane Access Road			
City:	Jonesboro	State:	AR	Zip Code: 72401
Business Designation:	<input type="checkbox"/> Individual <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Public Service Corp <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit			
Minority and Women-Owned Designation*:	<input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> American Indian <input type="checkbox"/> Asian American <input type="checkbox"/> Service Disabled Veteran <input type="checkbox"/> African American <input type="checkbox"/> Hispanic American <input type="checkbox"/> Pacific Islander American <input type="checkbox"/> Women-Owned			
	AR Certification #: _____ * See Minority and Women-Owned Business Policy			

PROSPECTIVE CONTRACTOR CONTACT INFORMATION			
Provide contact information to be used for bid solicitation related matters.			
Contact Person:	Jake Hayes	Title:	General Manager
Phone:	870-935-7490	Alternate Phone:	870-919-7526
Email:	jakehayes@gatewaysightsound.com		

CONFIRMATION OF REDACTED COPY
<input type="checkbox"/> YES, a redacted copy of submission documents is enclosed. <input checked="" type="checkbox"/> NO, a redacted copy of submission documents is <u>not</u> enclosed. I understand a full copy of non-redacted submission documents will be released if requested.  <i>Note: If a redacted copy of the submission documents is not provided with Prospective Contractor's response packet, and neither box is checked, a copy of the non-redacted documents, with the exception of financial data (other than pricing), will be released in response to any request made under the Arkansas Freedom of Information Act (FOIA). See Bid Solicitation for additional information.</i>

ILLEGAL IMMIGRANT CONFIRMATION
By signing and submitting a response to this <i>Bid Solicitation</i> , a Prospective Contractor agrees and certifies that they do not employ or contract with illegal immigrants. If selected, the Prospective Contractor certifies that they will not employ or contract with illegal immigrants during the aggregate term of a contract.

ISRAEL BOYCOTT RESTRICTION CONFIRMATION
By checking the box below, a Prospective Contractor agrees and certifies that they do not boycott Israel, and if selected, will not boycott Israel during the aggregate term of the contract.
<input checked="" type="checkbox"/> Prospective Contractor does not and will not boycott Israel.

**An official authorized to bind the Prospective Contractor to a resultant contract shall sign below.**

The signature below signifies agreement that any exception that conflicts with a Requirement of this *Bid Solicitation* will cause the Prospective Contractor's response to be disqualified.

Authorized Signature:  Title: General Manager

Use Ink Only.

Printed/Typed Name: Jake Hayes Date: 4/25/2019

## PROPOSED SUBCONTRACTORS FORM

- **Do not** include additional information relating to subcontractors on this form or as an attachment to this form.

PROSPECTIVE CONTRACTOR PROPOSES TO USE THE FOLLOWING SUBCONTRACTOR(S) TO PROVIDE SERVICES.

Type or Print the following information

[illegible]

## Gateway Equal Employment Opportunity

To qualify for employment at Gateway, individuals must be at least 18 years of age and capable of performing the designated duties. Gateway maintains a long established principle of judging each applicant on his/her merits.

It is the policy and practice of Gateway to provide equal employment opportunities for all employees. Employees are evaluated on individual merit, qualifications and competence. Employment will be administered without regard to race, color, religion, physical or mental handicaps, sex, ancestry, national origin, age, disability or veteran status. This policy is carried out in all of Gateway's practices involving employment including recruitment, hiring, promotions, compensation, benefits and training.

## ARKANSAS BUSINESS INFORMATION FORM

• Complete all fields or mark "N/A" if not applicable

LEGAL NAME OF BUSINESS AS REGISTERED IN THE STATE OF ARKANSAS
Gateway Sight and Sound LLC

AR BUSINESS LICENSE NUMBER:
200335346

PRIMARY MAILING ADDRESS AS REGISTERED IN THE STATE OF ARKANSAS	NUMBER OF YEARS IN BUSINESS IN AR
1618 Browns Lane Access Road	5

• Complete all fields or mark "N/A" if not applicable

PHYSICAL BUSINESS LOCATION AND ADDRESS
1618 Browns Lane Access Road

COMMERICAL GENERAL LIABILITY INSURANCE CARRIER NAME:
Travelers

COMMERICAL GENERAL LIABILITY INSURANCE POLICY NUMBER:
2LP-81N13132-19

EMPLOYEE LIABILITY INSURANCE CARRIER NAME:
Travelers

EMPLOYEE LIABILITY INSURANCE POLICY NUMBER:
4B-8L352361-19

VENDOR NUMBER AS SUPPLIED BY THE STATE OF ARKANSAS
100228824

WEBSITE ADDRESS, IF APPLICABLE
<a href="http://www.gatewaysightsound.com">http://www.gatewaysightsound.com</a>

CERTIFIED MINORITY OR WOMEN OWNED BUSINESS ENTERPRISE DIRECTORY LISTING NAME:
N/A

NUMBER OF EMPLOYEES	TOTAL NUMBER OF CERTIFIED EMPLOYEES	BREAKDOWN OF CERTIFIED EMPLOYEES						
		CTS	CTS-D	CTS-I	AVSP	PMP	CSP	*OTHER
10	5							X

*\*If other AV certification is held by employees, please list:*

PCNA, C4T1, C4T2, ACC1, ACC2, BIAMP, LUTRON, KRAMER,
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### BUSINESS CONTACT INFORMATION FORM

CONTACT NAME	CONTACT NAME TITLE	CONTACT PHONE #
Jake Hayes	General Manager	870-935-7490

CONTACT ALTERNATE PHONE #	CONTACT EMAIL ADDRESS
870-919-7526	jakehayes@gatewaysightsound.com

### ALTERNATE BUSINESS CONTACT INFORMATION

CONTACT NAME	CONTACT NAME TITLE	CONTACT PHONE #
Steve Sipa	Accounting	870-935-7490

CONTACT ALTERNATE PHONE #	CONTACT EMAIL ADDRESS
870-935-6411	stevesipa@gatewayengineering.us

### Audio/Visual Equipment Offering Form

**Business Name:** Gateway Sight & Sound

Category Number	Material Description	DO YOU OFFER? SELECT BELOW		Material Brand Name Tier 1 Brand Commercial Class	Material Brand Name Tier 2 Brand Consumer Class
E.1	AUDIO SOLUTIONS	YES	NO		
E.1.1	Acoustic Materials (Panels, sound damping materials)	<input checked="" type="checkbox"/>		Kinetics Noise Control	
E.1.2	Audio Players/Recorders (Includes AM/FM Radio, CD, MP3, etc.)	<input checked="" type="checkbox"/>		Denon Pro Tascam	
E.1.3	Listening Centers	<input type="checkbox"/>			
E.1.4	Public Address Systems (mounted and handheld)	<input type="checkbox"/>			
E.1.5	Portable Sound Systems (Including all-in-one systems)	<input type="checkbox"/>			
E.1.6	Audio Filters	<input checked="" type="checkbox"/>		Blamp, Symetrix, dbx, BSS, Extron	
E.1.7	Audio Attenuator	<input checked="" type="checkbox"/>		Blamp, Symetrix, dbx, BSS, Extron	
E.1.8	Speakers, Wired	<input checked="" type="checkbox"/>		Sonance, JBL, Kramer, C2G, Tannoy, Extron, and more	
E.1.9	Speakers, Wireless	<input checked="" type="checkbox"/>			HEOS, Sonos, Def Tech, and more
E.1.10	Amplifiers	<input checked="" type="checkbox"/>		Crown, GSC, Sonance, Extron, Stewart	Triad, AVProEdge
E.1.11	Audio Mixers	<input checked="" type="checkbox"/>		Soundcraft, Behringer, Mackie, Yamaha,	and more
E.1.12	Duplicators	<input type="checkbox"/>			
E.1.13	Listening Centers	<input type="checkbox"/>			
E.1.14	Audio Interface	<input checked="" type="checkbox"/>		Blamp, Symetrix, Extron, BSS, and more	
E.1.15	Assistive Listening Systems	<input checked="" type="checkbox"/>		Listen Technologies, Williams AV	
E.1.16	Audio Controllers	<input checked="" type="checkbox"/>		Blamp, Symetrix, dbx, BSS, Extron	
E.1.17	Digital to Analog Convertors	<input checked="" type="checkbox"/>		Kramer, AV Pro Edge, Extron, and more	
E.1.18	MIDI Controllers	<input type="checkbox"/>			
E.1.19	Keyboards	<input type="checkbox"/>			
E.1.20	Samplers and Synthesizers	<input type="checkbox"/>			
E.1.21	Stage Boxes	<input checked="" type="checkbox"/>		Elite Core, ProCo, On Stage, Ace Backstage, and more	
E.1.22	Telephone Audio Interfaces	<input checked="" type="checkbox"/>		Blamp, Symetrix, Extron, BSS	
E.1.23	Audience Response Systems	<input type="checkbox"/>			
E.1.24	Audio Conferencing Equipment	<input checked="" type="checkbox"/>		Blamp, Symetrix, Audix, Extron, BSS, and more	
E.1.25	Other (Please List)	<input type="checkbox"/>			
		<input type="checkbox"/>			
		<input type="checkbox"/>			
		<input type="checkbox"/>			
		<input type="checkbox"/>			
E.1.2	VIDEO SOLUTIONS	YES	NO		
E.1.2.1	Digital Video Recording / Playback	<input checked="" type="checkbox"/>		Denon Pro, Tascam	
E.1.2.2	Video Conferencing / Streaming Equipment	<input checked="" type="checkbox"/>		Vaddio, Blackmagic, AJA, Teradeck	
E.1.2.3	Projectors	<input checked="" type="checkbox"/>		Epson, NEC, Optoma	
E.1.2.4	Theater Projectors	<input checked="" type="checkbox"/>		Epson, NEC	
E.1.2.5	Studio Production Equipment	<input checked="" type="checkbox"/>		Blackmagic, AJA	
E.1.2.6	Analog Video Recording	<input checked="" type="checkbox"/>		Denon Pro, Tascam	
E.1.2.7	Digital Video Disc Players	<input checked="" type="checkbox"/>		Denon Pro, Tascam	LG, Samsung, Sony
E.1.2.8	Televisions (non-SMART)	<input checked="" type="checkbox"/>		LG Comm, Samsung Comm, NEC	LG, Samsung, Sony
E.1.2.9	Televisions (SMART)	<input checked="" type="checkbox"/>		LG Comm, Samsung Comm	LG, Samsung, Sony
E.1.2.10	High Definition Cameras (non security related)	<input checked="" type="checkbox"/>		Vaddio, HuddleCam HD, PTZ Optics	
E.1.2.11	Blu-Ray Players	<input checked="" type="checkbox"/>		Denon Pro	LG, Samsung, Sony
E.1.2.12	DVD Players	<input checked="" type="checkbox"/>		Denon Pro	LG, Samsung, Sony
E.1.2.13	Gaming Equipment	<input type="checkbox"/>			
E.1.2.14	Media Players	<input checked="" type="checkbox"/>		Denon Pro, Tascam	
E.1.2.15	Teleprompters	<input type="checkbox"/>			
E.1.2.16	Duplicators	<input type="checkbox"/>			
E.1.2.17	Digital Video Editing Systems	<input type="checkbox"/>			
E.1.2.18	Television Monitors / Monitor Receivers	<input type="checkbox"/>			
E.1.2.19	Broadcast and Studio Camcorders	<input type="checkbox"/>			
E.1.2.20	Character Generators and Graphic Solutions	<input type="checkbox"/>			
E.1.2.21	Video Editing Boards and Cards	<input type="checkbox"/>			
E.1.2.22	Video Keyers	<input type="checkbox"/>			
E.1.2.23	Video Mixers / Production Switchers	<input checked="" type="checkbox"/>		Blackmagic, AJA	
E.1.2.24	Video Wall Systems	<input checked="" type="checkbox"/>		LG Comm, NEC, Various DirectView LED	
E.1.2.25	Other (Please List)	<input type="checkbox"/>			
		<input type="checkbox"/>			
		<input type="checkbox"/>			
		<input type="checkbox"/>			
		<input type="checkbox"/>			



Material Description	DO YOU OFFER? SELECT BELOW		Material Brand Name Tier 1 Brand Commercial Class	Material Brand Name Tier 2 Brand Consumer Class
	YES	NO		
<b>PHOTOGRAPHY</b>	<b>YES</b>	<b>NO</b>		
Digital Cameras (SLR)				
Camcorders				
Aerial Imaging and Drones				
Lenses				
TriPods				
Flashes				
Photo Editing Software				
Scanners				
Photo Printers				
Darkroom Equipment				
Digital Imaging Cameras (Still)				
Other (Please List)				
<b>PRESENTATION AND DISPLAYS</b>	<b>YES</b>	<b>NO</b>		
Document Cameras	<input checked="" type="checkbox"/>		Vaddio, Lumens, Duka, Wolfvision, and more	
Monitors	<input checked="" type="checkbox"/>		NEC, Acer, LG, and more	
Projectors	<input checked="" type="checkbox"/>		Epson, NEC	Epson, NEC, Optoma, LG, and more
Screens, Rear Projection	<input checked="" type="checkbox"/>		Da-Lite, Draper, Screen Innovations	Screen Innovations, Elite Screens
Screens, Specialty	<input checked="" type="checkbox"/>		Da-Lite, Draper, Screen Innovations	Screen Innovations, Elite Screens
Listening Centers / Stations				
Video Wall	<input checked="" type="checkbox"/>		LG Comm, NEC, Various DirectView LED	
Inter-Active Displays (Including "tablet" style)	<input checked="" type="checkbox"/>		Avocor, ELO Touch, Sharp, and more	
Card Readers				
Other (Please List)				
<b>PRODUCTION AND LIGHTING EQUIPMENT</b>	<b>YES</b>	<b>NO</b>		
Audio Control Systems	<input checked="" type="checkbox"/>		Blamp, Symetrix, BSS, Extron, and more	
Portable Audio Equipment	<input checked="" type="checkbox"/>		JBL	
Production Duplication				
Broadcast Processors				
Stage Boxes	<input checked="" type="checkbox"/>		Elite Core, ProCo, On Stage, Ace Backstage, and more	
Studio Monitors				
Boom Equipment				
Lighting Control Filters and Gels				
Architectural Lighting Control Systems	<input checked="" type="checkbox"/>		Pharos, Chauvet, and more	
Dimmers and Dimmer Systems	<input checked="" type="checkbox"/>		Lutron, Crestron*, ETC, and more	Control4
DMX Devices	<input checked="" type="checkbox"/>		Chauvet, ETC, Blizzard, and more	
Rail Systems				
Stage and DJ Lighting				
Lighting Control Systems	<input checked="" type="checkbox"/>		Lutron, Crestron*, and more	Control4
Portable Lighting Control Systems				
Sound Mixers	<input checked="" type="checkbox"/>		Soundcraft, Behringer, Mackie, and more	
Lighting Auxiliary Equipment				
Lighting Control Software and Applications	<input checked="" type="checkbox"/>		Pharos, Chauvet, Vista, ETC, and more	
Portable Sound Mixers	<input checked="" type="checkbox"/>		Soundcraft, Behringer, Mackie, and more	
Other (Please List)				
*Crestron provided by strategic partner.				







# LIST OF COUNTIES SERVICED FORM

BUSINESS NAME: Gateway Sight & Sound

MAILING ADDRESS: 1618 Browns Lane Access Road

CITY: Jonesboro

STATE: AR

ZIP: 72401

PHONE NUMBER: 870-935-7490

EMAIL ADDRESS: jakehayes@gatewaysightsound.com

INDICATE THE COUNTIES WHERE AUDIO / VISUAL EQUIPMENT, INSTALLATION AND/OR AND SERVICES CAN BE PROVIDED (Check ALL that apply)

NORTHWEST		NORTHEAST		SOUTHWEST		SOUTHEAST		CENTRAL	
ALL	<input checked="" type="checkbox"/>	ALL	<input checked="" type="checkbox"/>	ALL	<input checked="" type="checkbox"/>	ALL	<input checked="" type="checkbox"/>	ALL	<input checked="" type="checkbox"/>
BAXTER	<input type="checkbox"/>	CLAY	<input type="checkbox"/>	CALHOUN	<input type="checkbox"/>	ARKANSAS	<input type="checkbox"/>	FAULKNER	<input type="checkbox"/>
BENTON	<input type="checkbox"/>	CLEBURNE	<input type="checkbox"/>	CLARK	<input type="checkbox"/>	ASHLEY	<input type="checkbox"/>	GARLAND	<input type="checkbox"/>
BOONE	<input type="checkbox"/>	CRAIGHEAD	<input type="checkbox"/>	COLUMBIA	<input type="checkbox"/>	BRADLEY	<input type="checkbox"/>	GRANT	<input type="checkbox"/>
CARROLL	<input type="checkbox"/>	CRITTENDEN	<input type="checkbox"/>	DALLAS	<input type="checkbox"/>	CHICOT	<input type="checkbox"/>	LONOKE	<input type="checkbox"/>
CONWAY	<input type="checkbox"/>	CROSS	<input type="checkbox"/>	HEMPSTEAD	<input type="checkbox"/>	CLEVELAND	<input type="checkbox"/>	PERRY	<input type="checkbox"/>
CRAWFORD	<input type="checkbox"/>	FULTON	<input type="checkbox"/>	HOT SPRING	<input type="checkbox"/>	DESHA	<input type="checkbox"/>	PULASKI	<input type="checkbox"/>
FRANKLIN	<input type="checkbox"/>	GREENE	<input type="checkbox"/>	HOWARD	<input type="checkbox"/>	DREW	<input type="checkbox"/>	SALINE	<input type="checkbox"/>
JOHNSON	<input type="checkbox"/>	INDEPENDENCE	<input type="checkbox"/>	LAFAYETTE	<input type="checkbox"/>	JEFFERSON	<input type="checkbox"/>		<input type="checkbox"/>
LOGAN	<input type="checkbox"/>	IZARD	<input type="checkbox"/>	LITTLE RIVER	<input type="checkbox"/>	LEE	<input type="checkbox"/>		<input type="checkbox"/>
MADISON	<input type="checkbox"/>	JACKSON	<input type="checkbox"/>	MONTGOMERY	<input type="checkbox"/>	LINCOLN	<input type="checkbox"/>		<input type="checkbox"/>
MARION	<input type="checkbox"/>	LAWRENCE	<input type="checkbox"/>	MILLER	<input type="checkbox"/>	MONROE	<input type="checkbox"/>		<input type="checkbox"/>
NEWTON	<input type="checkbox"/>	MISSISSIPPI	<input type="checkbox"/>	NEVADA	<input type="checkbox"/>	PHILLIPS	<input type="checkbox"/>		<input type="checkbox"/>
POPE	<input type="checkbox"/>	POINSETT	<input type="checkbox"/>	OUACHITA	<input type="checkbox"/>	PRAIRIE	<input type="checkbox"/>		<input type="checkbox"/>
SEARCY	<input type="checkbox"/>	RANDOLPH	<input type="checkbox"/>	PIKE	<input type="checkbox"/>	ST. FRANCIS	<input type="checkbox"/>		<input type="checkbox"/>
SEBASTIAN	<input type="checkbox"/>	SHARP	<input type="checkbox"/>	POLK	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
SCOTT	<input type="checkbox"/>	STONE	<input type="checkbox"/>	SEVIER	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
VANBUREN	<input type="checkbox"/>	WHITE	<input type="checkbox"/>	UNION	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
WASHINGTON	<input type="checkbox"/>	WOODRUFF	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
YELL	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>

## ARKANSAS DISTRIBUTORS / ADDITIONAL LOCATIONS FORM

Manufacturer / Business Name
N/A

Authorized Reseller / Business Name	Authorized Reseller / AR Business Address
N/A	N/A

Authorized Reseller / Business Contact Name	Authorized Reseller / Business Contact Phone #	Authorized Reseller / Business Contact Email Address
N/A	N/A	N/A

Manufacturer / Business Name
N/A

Authorized Reseller / Business Name	Authorized Reseller / AR Business Address
N/A	N/A

Authorized Reseller / Business Contact Name	Authorized Reseller / Business Contact Phone #	Authorized Reseller / Business Contact Email Address
N/A	N/A	N/A

Manufacturer / Business Name
N/A

Authorized Reseller / Business Name	Authorized Reseller / AR Business Address
N/A	N/A

Authorized Reseller / Business Contact Name	Authorized Reseller / Business Contact Phone #	Authorized Reseller / Business Contact Email Address
N/A	N/A	N/A

Manufacturer / Business Name
N/A

Authorized Reseller / Business Name	Authorized Reseller / AR Business Address
N/A	N/A

Authorized Reseller / Business Contact Name	Authorized Reseller / Business Contact Phone #	Authorized Reseller / Business Contact Email Address
N/A	N/A	N/A

## CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM

Failure to complete all of the following information may result in a delay in obtaining a contract, lease, purchase agreement, or grant award with any Arkansas State Agency.

SUBCONTRACTOR:

SUBCONTRACTOR NAME:

☐ Yes ☒ No

IS THIS FOR:

TAXPAYER ID NAME: Gateway Sight & Sound LLC

☐ Goods?

☐ Services? ☒ Both?

YOUR LAST NAME: Hayes

FIRST NAME: Jake

M.I.: A

ADDRESS: 1618 Browns Lane Access Rd

CITY: Jonesboro

STATE: AR

ZIP CODE: 72401

COUNTRY: U.S.A.

**AS A CONDITION OF OBTAINING, EXTENDING, AMENDING, OR RENEWING A CONTRACT, LEASE, PURCHASE AGREEMENT, OR GRANT AWARD WITH ANY ARKANSAS STATE AGENCY, THE FOLLOWING INFORMATION MUST BE DISCLOSED:**

### FOR INDIVIDUALS \*

Indicate below if: you, your spouse or the brother, sister, parent, or child of you or your spouse is a current or former: member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee:

Position Held	Mark (✓)		Name of Position of Job Held [senator, representative, name of board/ commission, data entry, etc.]	For How Long?		What is the person(s) name and how are they related to you? [i.e., Jane Q. Public, spouse, John Q. Public, Jr., child, etc.]	
	Current	Former		From MM/YY	To MM/YY	Person's Name(s)	Relation
General Assembly							
Constitutional Officer							
State Board or Commission Member							
State Employee							

☒ None of the above applies

### FOR AN ENTITY (BUSINESS) \*

Indicate below if any of the following persons, current or former, hold any position of control or hold any ownership interest of 10% or greater in the entity: member of the General Assembly, Constitutional Officer, State Board or Commission Member, State Employee, or the spouse, brother, sister, parent, or child of a member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee. Position of control means the power to direct the purchasing policies or influence the management of the entity.

Position Held	Mark (✓)		Name of Position of Job Held [senator, representative, name of board/commission, data entry, etc.]	For How Long?		What is the person(s) name and what is his/her % of ownership interest and/or what is his/her position of control?	
	Current	Former		From MM/YY	To MM/YY	Person's Name(s)	Ownership Interest (%) Position of Control
General Assembly							
Constitutional Officer							
State Board or Commission Member							
State Employee							

☒ None of the above applies



## Contract and Grant Disclosure and Certification Form

Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this contract. Any contractor, whether an individual or entity, who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the agency.

As an additional condition of obtaining, extending, amending, or renewing a contract with a state agency I agree as follows:

1. Prior to entering into any agreement with any subcontractor, prior or subsequent to the contract date, I will require the subcontractor to complete a **CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM**. Subcontractor shall mean any person or entity with whom I enter an agreement whereby I assign or otherwise delegate to the person or entity, for consideration, all, or any part, of the performance required of me under the terms of my contract with the state agency.

2. I will include the following language as a part of any agreement with a subcontractor:

*Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this subcontract. The party who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the contractor.*

3. No later than ten (10) days after entering into any agreement with a subcontractor, whether prior or subsequent to the contract date, I will mail a copy of the **CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM** completed by the subcontractor and a statement containing the dollar amount of the subcontract to the state agency.

I certify under penalty of perjury, to the best of my knowledge and belief, all of the above information is true and correct and that I agree to the subcontractor disclosure conditions stated herein.

Signature Jake Hayes Title General Manager Date 06/17/2021

Vendor Contact Person Jake Hayes Title General Manager Phone No. 870-935-7490

Agency use only

Agency Number \_\_\_\_\_ Agency Name \_\_\_\_\_ Agency Contact Person \_\_\_\_\_ Contact Phone No. \_\_\_\_\_ Contract or Grant No. \_\_\_\_\_