DEPARTMENT OF ADMINISTRATIVE SERVICES

STANDARD AFFIRMATION AND DISCLOSURE FORM

EXECUTIVE ORDER 2011-12K

Governing the Expenditure of Public Funds on Offshore Services

All of the following provisions must be included in all invitations to bid, requests for proposals, state term schedules, multiple award contracts, requests for quotations, informal quotations, and statements of work. This information is to be submitted as part of the response to any of the procurement methods listed.

CONTRACTOR/SUBCONTRACTOR AFFIRMATION AND DISCLOSURE:

By the signature affixed to this response, the Bidder/Offeror affirms, understands and will abide by the requirements of Executive Order 2011-12K. If awarded a contract, the Bidder/Offeror becomes the Contractor and affirms that both the Contractor and any of its subcontractors shall perform no services requested under this Contract outside of the United States.

The Bidder/Offeror shall provide all the name(s) and location(s) where services under this Contract will be performed in the spaces provided below or by attachment. Failure to provide this information may subject the Bidder/Offeror to sanctions, termination or a damages assessment. If the Bidder/Offeror will not be using subcontractors, indicate "Not Applicable" in the appropriate spaces.

1. Principal location of business of Contractor:

   _____   _____
   (Address)   (City, State, Zip)

   Name/Principal location of business of subcontractor(s):

   _____   _____
   (Name)   (Address, City, State, Zip)

   _____   _____
   (Name)   (Address, City, State, Zip)

2. Location where services will be performed by Contractor:

   _____   _____
   (Address)   (City, State, Zip)

   Name/Location where services will be performed by subcontractor(s):

   _____   _____
   (Name)   (Address, City, State, Zip)

_____   _____
(Name)   (Address, City, State, Zip)

3. Location where state data will be stored, accessed, tested, maintained or backed-up, by
    Contractor:

_____   _____
(Address)   (Address, City, State, Zip)

Name/Location(s) where state data will be stored, accessed, tested, maintained or backed-up by
subcontractor(s):

_____   _____
(Name)   (Address, City, State, Zip)

_____   _____
(Name)   (Address, City, State, Zip)

_____   _____
(Name)   (Address, City, State, Zip)

_____   _____
(Name)   (Address, City, State, Zip)

_____   _____
(Name)   (Address, City, State, Zip)

4. Location where services to be performed will be changed or shifted by Contractor:

_____   _____
(Address)   (Address, City, State, Zip)

Name/Location(s) where services will be changed or shifted to be performed by subcontractor(s):

_____   _____
(Name)   (Address, City, State, Zip)

_____   _____
(Name)   (Address, City, State, Zip)

_____   _____
(Name)   (Address, City, State, Zip)

_____   _____
(Name)   (Address, City, State, Zip)

_____   _____
(Name)   (Address, City, State, Zip)