



STATE OF MISSOURI  
DEPARTMENT OF REVENUE  
REQUEST FOR PROPOSAL (RFP)

SOLICITATION/OPPORTUNITY (OPP) NO.: RFPDOR230074  
TITLE: Location License Office Gainesville License Office  
ISSUE DATE: 04/11/2023

REQ NO.:  
BUYER: Tara Ronimous  
PHONE NO.: (573) 751-2145  
EMAIL: Tara.Ronimous@dor.mo.gov

RETURN PROPSAL NO LATER THAN: 04/24/2023

AT 2:00 PM CENTRAL TIME (END DATE)

RFP RESPONSE MUST BE SUBMITTED ELECTRONICALLY THROUGH MissouriBUYS. <https://missouribuyss.mo.gov/>  
MAILED, COURIER, OR HAND-DELIVERED RFP RESPONSE WILL NOT BE ACCEPTED.

CONTRACT PERIOD: Effective Date of Contract through five (5) years.

DELIVER SUPPLIES/SERVICES FOB (Free On Board) DESTINATION TO THE FOLLOING ADDRESS:

DELIVER SUPPLIES/SERVICES  
FOB (Free on Board) DESTINATION TO:

Gainesville, MO

DELIVER SERVICES FOR:  
Department of Revenue  
P.O. Box 311  
Jefferson City, MO 65105

The vendor hereby declares understanding, agreement and certification of compliance to provide the items and/or services, at the prices quoted, in accordance with all requirements and specifications contained herein and the Terms and Conditions Request for Proposal (Revised 11/09/2022.) The vendor further agrees that the language of this RFP shall govern in the event of a conflict with his/her proposal. The vendor further agrees that upon receipt of an authorized purchase order from the Department of Revenue or when a Notice of Award is signed and issued by an authorized official of the State of Missouri, a binding contract shall exist between the vendor and the State of Missouri. The vendor shall understand and agree that in order for their proposal to be considered for evaluation, they must be registered in MissouriBUYS. If not registered at time of proposal opening, the vendor must register in MissouriBUYS upon request by the state immediately after proposal opening.

SIGNATURE REQUIRED

VENDOR NAME GAINESVILLE LICENSE OFFICE		MissouriBUYS System ID (See vendor profile -- main information screen) RFPDOR230074	
MAILING ADDRESS PO BOX 59			
CITY, STATE, ZIP CODE GAINESVILLE MO 65655			
CONTACT PERSON ROBIN MORRISON		EMAIL ADDRESS GAINESVILLEAGENTOFFICE@DOR.MO.GOV	
PHONE NUMBER (417) 679-0280		FAX NUMBER (417) 679-0279	
VENDOR TAX FILING TYPE WITH IRS (CHECK ONE)			
<input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Individual <input type="checkbox"/> State/Local Government <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> IRS Tax Exempt			
AUTHORIZED SIGNATURE <i>Robin Morrison</i>		DATE 04/19/2023	
PRINTED NAME ROBIN MORRISON		TITLE AGENT	

**EXHIBIT A**

**Personnel, Method of Performance, Experience, and Training**

**SECTION A: PERSONNEL RETENTION**

The intention of this section is to determine what vendors will commit to pay as a minimum hourly wage for all personnel that will review documentation or process license office transactions as well as what amount of training will be provided to new employees processing motor vehicle or driver licensing transactions. Additional pay increases may be given beyond what is proposed as a minimum hourly wage below. Points will be awarded as stated in Attachment 6 of the RFP for the responses made below.

**A-1: Minimum Hourly Wage**

Indicate the minimum hourly wage, excluding any benefits or bonuses, you commit to for all personnel that will review documentation or process license office transactions. If any personnel will be paid an annual salary, factor the number of hours they will work and break the annual salary amount out to an hourly wage. Additional pay increases may be given beyond what is proposed below. Points will be awarded as stated in Attachment 6 of the RFP.

Hourly wage: 

\$ 11.55
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**A-2: Training – New Employees**

Indicate the minimum number of hours every new employee will Job Shadow and/or Reverse Job Shadow (as those terms are defined in Attachment 3) experienced employees processing motor vehicle and/or driver’s license transactions within the first six (6) months of employment. If the vendor selects zero (0) hours, every new employee will still be required to complete the mandatory training in Section 2.3.6.

- 120 hours
- 80 hours
- 40 hours
- 0 hours

**A-3: Prior experience in a license office.**

Indicate the years of experience the individual named as the Contract License Office Manager has working in a license office. The individual named as the Contract License Office Manager will be required to complete the mandatory training in Section 2.3.6. If the Contract License Office Manager’s experience cannot be verified, no points will be awarded for this section.

- Contract License Office Manager has one (1) or more years of experience as the Manager of a license office within the last ten (10) years.
- Contract License Office Manager has held an assistant manager or other supervisory position in a license office for three (3) of the last ten (10) years.
- Contract License Office Manager has held any position in a license office for two (2) of the last ten (10) years.
- Contract License Office Manager has held any position in a license office for one (1) of the last ten (10) years.
- Contract License Office Manager has less than one (1) year of experience or has never worked in a license office.

**EXHIBIT A (Continued)****SECTION B: CUSTOMER SERVICE INITIATIVES AND VENDOR EXPERIENCE**

License offices act as the face of state government and as such should strive to provide exceptional customer service, by not only providing prompt, accurate, and friendly service, but also by ensuring the office is maintained in a professional and clean manner. In addition, personnel should present themselves in a professional and courteous manner the same as one would expect when entering any professional place of business. The following sections provide the vendor an opportunity to propose items that will help ensure exceptional customer service to the citizens of Missouri.

**B-1: Public Restroom**

Indicate the amenities offered by the office:

- ADAAA compliant restroom located within the license office that will be available to the public upon request, cleaned on a daily basis, and functioning with little to no closure during regular business hours.
- A non-ADAAA compliant restroom located within the license office that will be available to the public upon request, cleaned on a daily basis, and functioning with little to no closure during regular business hours.
- Access to an ADAAA compliant restroom located within the facility, such as an office building or strip mall, that is not the responsibility of the License Office and is no more than 500 feet from door to door.
- Access to a restroom within the facility, such as an office building or strip mall, that is not the responsibility of the License Office and is no more than 500 feet from door to door.
- No restroom will be available.

**B-2: Wait Times**

Indicate which one of the following the vendor will maintain each day:

- Contractor will maintain a wait time of 15 minutes or less in both motor vehicle and driver license.
- Contractor will maintain a wait time of 30 minutes or less in both motor vehicle and driver license.

**B-3: Pre-Screener**

Indicate which one of the following additional services will be provided to customers to reduce wait times. See Section 2.8.3 for pre-screener requirements. The pre-screener will be assisting customers in the license office for:

- 75 % or more of all office hours each month
- 50% or more of all office hours each month
- 25% or more of all office hours each month
- Vendor does not commit to providing pre-screener services

**EXHIBIT A (Continued)****B-4: Assistance to customers**

Indicate the services or accommodations provided to customers on a daily basis (in addition to the requirements specified in Section 2.8.4)

- Monitor(s) that are a minimum of 32" and will at a minimum display what customers must submit to complete transactions.
- Take a number system (may be manual or electronic) for customers as they enter the office, that is used on a daily basis, even when the office is not busy.

**B-5: Assistance to customers - Contract License Office Manager's Presence in a License Office**

Vendor should select one of the following to indicate the minimum number of hours each week the Contract License Office Manager, as defined in Attachment 3, will be on-site in this license office during operating hours.

- The vendor proposes that the Contract License Office Manager named below will be present in the license office during all required operating hours per week.
- The vendor proposes that the Contract License Office Manager named below will be present at least 75% of all required operating hours per week.
- The vendor proposes that the Contract License Office Manager named below will be present at least 50% of all required operating hours per week.
- The vendor proposes that the Contract License Office Manager named below will be present less than 50% of all required operating hours per week.



**EXHIBIT A (Continued)****B-6B Inventory Control Experience**

Has the Vendor's License Office(s) been assessed charges for missing inventory during the last two (2) years?

- Yes** The total amount was equal to or greater than one-hundred seventy-five (175) dollars.
- Yes** The total amount was less than one-hundred seventy-five (175) dollars but equal to or greater than seventy-five (75) dollars.
- Yes** The total amount was less than seventy-five (75) dollars.
- No** The License Office(s) has not been assessed any inventory charges in the last two (2) years.
- N/A** Vendor has no prior experience operating a License Office.

**B-6C: Experience - Contract License Office Manager's - Customer Service Experience**

Identify the Contract License Office Manager's experience in a customer service position.

- The Contract License Office Manager has been in a customer service position for all of the last 15 years.
- The Contract License Office Manager has worked at least ten (10) years over the last 15 years in a customer service position.
- The Contract License Office Manager has worked at least six (6) years over the last 15 years in a customer service position.
- The Contract License Office Manager has less than six (6) years of experience over the last 15 years in a customer service position.

**B-6D: Experience - Contract License Office Manager's - Transaction Processing**

- 1) The state agency will verify the proposed Contract License Office Manager's experience processing transactions on state agency specific equipment identified in the RFP based on the information provided in Section B-6A and award points based on the transaction ranges listed below. Transactions assigned for processing through the Online Renewal System, DMV Connect, will not be included towards the proposed Contract License Office Manager's total transactions processed.
  - a) In the last ten (10) years the Contract License Office Manager has:
    - Processed 5,000 or more Driver License Transactions
    - Processed 2,500 – 4,999 Driver License Transactions
    - Processed 1,000 – 2,499 Driver License Transactions
    - Processed 1 - 999 Driver License Transactions
    - Never worked in a License Office or never processed Driver License Transactions
  - b) In the last ten (10) years the Contract License Office Manager has:
    - Processed 15,000 or more Motor Vehicle Transactions
    - Processed 10,000 – 14,999 Motor Vehicle Transactions
    - Processed 5,000 – 9,999 Motor Vehicle Transactions
    - Processed 1,000 – 4,999 Motor Vehicle transactions
    - Processed 1 -999 Motor Vehicle Transactions
    - Never worked in a License Office or never processed Motor Vehicle Transactions

**EXHIBIT A (Continued)**

**B-6D: Experience - Contract License Office Manager's - Transaction Processing - Continued**

2) In addition, the Contract License Office Manager has:

- Worked in a profession over the past ten (10) years with three (3) or more of the following computer programs: (1) Windows 7 or above; (2) Microsoft Office, including Excel, Outlook, and Word; (3) SharePoint; (4) Internet Explorer, Microsoft Edge, or Google Chrome; (5) WebEx; and (6) Adobe Acrobat Reader or better.
- Worked in a profession over the past five (5) years with three (3) or more of the following computer programs: (1) Windows 7 or above; (2) Microsoft Office, including Excel, Outlook, and Word; (3) SharePoint; (4) Internet Explorer, Microsoft Edge, or Google Chrome; (5) WebEx; and (6) Adobe Acrobat Reader or better.
- Not met either of the computer experience qualifications identified above.

**SECTION C: Miscellaneous Items**

**C-1 Select the following items that the vendor commits to having in their license office.**

- Yes       No      A private working area for a State of Missouri staff member as described in Section 2.8.5 a. of the RFP.
- Yes       No      Will provide a separate, non-published phone number for state agency use.
- Yes       No      Installed security system will allow the state agency's Central Office access to view the security system cameras via the Internet at any time, without requesting permission. (The state agency will access on an as needed basis to address real time customer concerns as well as fraud review)

**C-2 Panic Buttons - Which of the following alarm-monitored panic buttons will the vendor's license office have:**

- Yes       No      Will install at least one (1) concealed, alarm-monitored panic button under the customer service counter(s)/desk(s).
- Yes       No      Will install a concealed, alarm-monitored panic button under the customer service counters/desks between every two (2) workstations. (Credit will not be given if there are not at least three workstations in Attachment 1)

**EXHIBIT A (Continued)****SECTION D: Entity Type and Vendor Ownership, Officers, and Contract Management Information**

The vendor is required to name all members, partners, officers, individuals, and entities with an ownership interest in the vendor's entity in the box below.

For all vendor's officer(s), and any officer(s) of any entity holding an interest in the vendor, Exhibit E, Section B must be completed for each officer. If additional space is needed attach supplemental documentation:

**D-1 Entity Type**

1) Identify the vendor's type of entity:

- General and Business Corporations
- Limited Liability Company (LLC)
- Nonprofit Corporation, Religious organization, and Charitable Organization
- Partnership
- Political Subdivision
- Sole Proprietor
- Other (describe): \_\_\_\_\_

2) Is a copy of the vendor's legal and binding operating agreement, partnership agreement, bylaws, or other similar such business document included? Failure to provide the information may result in the vendor's proposed bid not being scored or given consideration.

- A copy of the document is attached.
- I am a sole proprietor or political subdivision, and as such, no documentation is required.



**EXHIBIT A (Continued)**

**D-2 Ownership of the Entity submitting this proposal.**

Identify the names of all members, partners, officers, individuals, and entities with an ownership interest in the entity submitting this RFP proposal, and their respective ownership interests. If additional space is needed attach supplemental documentation.

If the entity as named in the vendor’s bid proposal is owned in whole or any part by another entity, vendor must provide the state agency with the legal and binding operating agreement, partnership agreement, bylaws, or other similar document of each ownership-interest holding entity indicating all members, partners, officers, individuals, or entities with an ownership interest, including their respective ownership interests in the entity that has an ownership interest in the entity that has been named in the vendor’s bid proposal.

Failure to provide the information specified will result in the vendor’s proposed bid being deemed unresponsive and will not be scored or given consideration

Ownership Interest and/or Percentage	Name of Member, Partner, Officer, Individual or Entity with an Ownership Interest

**D-3 Officer(s)**

Identify the name(s) of all vendor’s officer(s) (as defined in Attachment 3), and any officer(s) of any entity holding an interest in the vendor, Exhibit E, Section B must be completed for each officer. If additional space is needed attach supplemental documentation.

For all vendor’s officer(s), and any officer(s) of any entity holding an interest in the vendor, Exhibit E, Section B must be completed for each officer listed here. If additional space is needed attach supplemental documentation:

Officer Name
Officer Name
Officer Name

Officer Name
Officer Name
Officer Name

**EXHIBIT A (Continued)****D-4 Prior History**

- 1.) Respond yes or no to the following questions surrounding the vendor's officers and Contract License Office Manager and their work history with current and prior business entities.

Yes  No Has an officer, owner or the Contract License Office Manager, or any entity an officer or the Contract License Office Manager is or has been an owner or officer of, had a judgment rendered against them in a discrimination-related lawsuit?

Answering yes to this question shall preclude the vendor from consideration of award of the contract.

Yes  No Has an officer, owner or the Contract License Office Manager had any state or federal felony conviction, guilty plea, or adjudication for fraud, embezzlement, forgery, identify theft, stealing, tax evasion, or other criminal acts involving dishonesty?

Answering yes to this question shall preclude the vendor from consideration of award of the contract.

- 2.) If either of the questions below are responded to in the affirmative, only a maximum total of 14 points shall be deducted from the vendor's overall point score. See Section 4.6.4 for additional qualifications.

Yes  No Has the vendor been awarded a state contract to operate a license office and been previously suspended by the Office of Administration Division of Purchasing or Department of Revenue, since August 1, 2022, or has the vendor had a contract to operate a license office that has been cancelled for breach or terminated for breach, since August 1, 2022?

Yes  No Has any officer or the Contract License Office Manager of the vendor been an owner or an officer of an entity that operated a state license office that was previously suspended by the Office of Administration Division of Purchasing, or Department of Revenue, since August 1, 2022 or whose contract to operate a license office has been cancelled for breach or terminated for breach, since August 1, 2022?

The officer or the Contract License Office Manager must have been an owner, officer, or Contract License Office Manager (as the terms "officer" and "Contract License Office Manager" were defined in the RFPs resulting in the contract award) at the time that the entity was suspended, or the contract was cancelled for breach or terminated for breach, since August 1, 2022.

**EXHIBIT B**  
Vendor Status

Select the appropriate status and complete the information accordingly.

<input checked="" type="checkbox"/> This Exhibit <b>DOES NOT APPLY.</b>	No additional information is provided since the vendor’s status does not qualify in any of the areas listed below.
<input type="checkbox"/> The vendor is a <b>POLITICAL SUBDIVISION</b> of Missouri.	The vendor must submit one of the following in order to receive credit as a Political Subdivision: <ul style="list-style-type: none"> <li>• Documentation issued by the vendor’s governing body authorizing the submission of the proposal by the vendor; or</li> <li>• Meeting minutes from the vendor’s governing body authorizing the submission of the proposal by the vendor.</li> </ul>
<input type="checkbox"/> The vendor is an <b>IRS TAX EXEMPT ENTITY</b> - Tax Exempt entities are encouraged to review <u>IRS Publication 598</u> , Tax on Unrelated Business Income of Exempt Organizations, Chapter 3 Unrelated Trade or Business.	In order to receive credit as an IRS Tax Exempt Entity, the vendor must either (1) be listed on the Internal Revenue Service (IRS) website confirming the vendor’s status as an IRS Tax Exempt Entity as specified below, or (2) submit the Required Documentation specified below: <p><b>1. IRS Website:</b></p> <ul style="list-style-type: none"> <li>• The vendor is listed on the following IRS website confirming the vendor’s status as an IRS Tax Exempt Entity: <a href="https://irs.gov/Charities-&amp;-Non-Profits/Exempt-Organizations-Business-Master-File-Extract-EO-BMF">irs.gov/Charities-&amp;-Non-Profits/Exempt-Organizations- Business-Master-File-Extract-EO-BMF</a>.</li> <li>• If the vendor is exempt from taxation under <u>Section 501(c)(4)</u>, the vendor must also complete and submit a notarized Non Action Organization Certification (<u>Form 5638</u>) that certifies the vendor is not a civic organization that would be considered an action organization under <u>26 C.F.R. Section 1.501(c)(3)-1(c)(3)</u>.</li> </ul> <p align="center"><b>OR</b></p> <p><b>2. Required Documentation:</b></p> <ul style="list-style-type: none"> <li>• A letter issued to the vendor by the Internal Revenue Service (IRS), citing the vendor’s organization as being exempt from taxation under <u>Section 501(c)(3) or 501(c)(6), or 501(c)(4)</u>, <b>except those civic organizations that would be considered action organizations under 26 C.F.R. Section 1.501(c)(3)-1(c)(3)</b>, of the Internal Revenue Code of 1986, as amended; AND</li> <li>• A copy of the vendor’s most recent annual Federal Tax filing (990 series or comparable annual filing if required for the previous year); AND</li> <li>• If the vendor is exempt from taxation under <u>Section 501(c)(4)</u>, the vendor must also complete and submit a notarized Form 5638 that certifies the vendor is not a civic organization that would be considered an action organization under <u>26 C.F.R. Section 1.501(c)(3)-1(c)(3)</u>.</li> </ul> <p><b>3. Reinvestment of Net Proceeds:</b> Select “Yes” or “No” below. Failure to respond will be considered a “No” response.</p> <p>Does the vendor/IRS Tax Exempt Entity propose to reinvest a minimum of 75% of the license office’s net proceeds in charitable organizations in Missouri by December 31 each calendar year?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, the vendor shall be required if requested by the state agency or other authorized representatives of the State of Missouri, to allow for the inspection of the contractor’s documents and records relating to the 75% reinvestment of net proceeds, and all documents and records concerning their calculation of net proceeds, which shall include their gross receipts, profit, costs, and all other financial information.</p>

**EXHIBIT C**

## Missouri Service-Disabled Veteran Business Enterprise (SDVE) Preference

This Exhibit **DOES NOT APPLY** or  This Exhibit **DOES APPLY** and is completed.

Pursuant to Section 34.074, RSMo, and 1 CSR 40-1.050, the State of Missouri has a goal of awarding three (3) percent of all contracts for the performance of any job or service to qualified service-disabled veteran business enterprises (SDVEs). (See below for definitions included in Section 34.074, RSMo.)

**STANDARDS:**

The following standards shall be used by the State of Missouri in determining whether an individual, business, or organization qualifies as a SDVE. Confirm that each of the following applies to the vendor by selecting all that apply.:

- Doing business as a Missouri firm, corporation, or individual or maintaining a Missouri office or place of business, not including an office of a registered agent;
- Having not less than fifty-one percent (51%) of the business owned by one (1) or more service-disabled veterans (SDVs) or, in the case of any publicly-owned business, not less than fifty-one percent (51%) of the stock of which is owned by one (1) or more SDVs. (An SDV is defined as any individual who is disabled as certified by the appropriate federal agency responsible for the administration of veterans' affairs.);
- Having the management and daily business operations controlled by one (1) or more SDVs;
- Having a copy of the SDV's award letter from the Department of Veterans Affairs or a copy of the SDV's discharge paper (DD Form 214, Certificate of Release or Discharge from Active Duty) and a copy of the SDV's documentation certifying disability by the appropriate federal agency responsible for the administration of veterans' affairs; and
- Possessing the power to make day-to-day as well as major decisions on matters of management, policy, and operation.

If the vendor meets the standards of a qualified SDVE as stated above and unless previously submitted within the past five (5) years to the Office of Administration, Division of Purchasing, the vendor **must** provide the following SDV documents to receive the Missouri SDVE three-point bonus preference:

- A copy of the SDV's award letter from the Department of Veterans Affairs or a copy of the SDV's discharge paper (DD Form 214, Certificate of Release or Discharge from Active Duty);
- A copy of the SDV's documentation certifying disability by the appropriate federal agency responsible for the administration of veterans' affairs; and
- A completed copy of this Exhibit.

(NOTE: The SDV's award letter, the SDV's discharge paper, and the SDV's documentation certifying disability shall be considered confidential pursuant to subsection 14 of Section 610.021, RSMo.)

**AFFIDAVIT OF WORK AUTHORIZATION**

The vendor who meets the Section 285.525, RSMo, definition of a business entity must complete and return the following Affidavit of Work Authorization.

Please have Exhibit D – Section B Affidavit of Work Authorization properly notarized and submit as an attachment to your submitted proposal. Please name the attachment ("Vendor Name" Notarized Affidavit of Work Authorization)

Comes now Robin Morrison as Contract Agent first being  
(Name of Business Entity Authorized Representative) (Position/Title)

duly sworn on my oath, affirm Gainesville License Office is enrolled and will continue to  
(Business Entity Name)

participate in the E-Verify federal work authorization program with respect to employees hired after enrollment in the program who are proposed to work in connection with the services related to contract(s) with the State of Missouri for the duration of the contract(s), if awarded in accordance with subsection 2 of Section 285.530, RSMo. I also affirm that Gainesville License Office does not and will not knowingly employ a person who is an  
(Business Entity Name)

unauthorized alien in connection with the contracted services provided under the contract(s) for the duration of the contract(s), if awarded.

In Affirmation thereof, the facts stated above are true and correct. (The undersigned understands that false statements made in this filing are subject to the penalties provided under Section 575.040, RSMo.)

Authorized Representative's Signature  
*Robin Morrison*

Typed Name  
**Robin Morrison**

Title  
**contract agent**

Date  
**05/12/2023**

E-Verify Company ID Number  
**835682**

Email Address  
**gainesvilleagentoffice@dor.mo.gov**

**NOTARY**

Subscribed and sworn to before me this 12<sup>th</sup> of May 2023 I am commissioned as a  
(Day) (Month/Year)

notary public within the County of Ozark State of Missouri, and my  
(Name of County) (Name of State)

commission expires on 9-15-25  
(Date)

**ANNETTE CHAROLENE LANE**  
Notary Public – Notary Seal  
STATE OF MISSOURI  
Ozark County  
My Commission Expires Sept. 15, 2025  
Commission #21341523

Signature of Notary  
*Annette Lane*

Date  
**5-12-23**



**EXHIBIT D (Continued)**

(Complete the following if you have the E-Verify documentation and a current Affidavit of Work Authorization already on file with the State of Missouri. If completing Section C, do not complete Section B.)

**SECTION C - AFFIDAVIT ON FILE - CURRENT BUSINESS ENTITY STATUS**

I certify that Gainesville License Office (Business Entity Name) MEETS the definition of a business entity as

defined in Section 285.525, RSMo pertaining to Section 285.530, RSMo and have enrolled and currently participates in the E-Verify federal work authorization program with respect to the employees hired after enrollment in the program who are proposed to work in connection with the services related to contract(s) with the State of Missouri. We have previously provided documentation to a Missouri state agency or public university that affirms enrollment and participation in the E-Verify federal work authorization program. The documentation that was previously provided included the following.

- \* The E-Verify Employment Eligibility Verification page OR a page from the E-Verify Memorandum of Understanding (MOU) listing the vendor's name and the MOU signature page completed and signed by the vendor's and the Department of Homeland Security - Verification Division.
- \* A current, notarized Affidavit of Work Authorization (must be completed, signed, and notarized within the past twelve months).

Name of Missouri State Agency or Public University\* to Which Previous E-Verify Documentation Submitted

**Mo Department of Revenue**

(\*Public University includes the following five schools under Chapter 34, RSMo: Harris-Stowe State University - St. Louis; Missouri Southern State University - Joplin; Missouri Western State University - St. Joseph; Northwest Missouri State University - Maryville; Southeast Missouri State University - Cape Girardeau.)

Date of Previous E-Verify Documentation Submission

**12/09/2014**

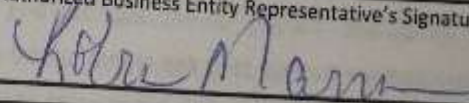
Previous Bid/Contract Number for Which Previous E-Verify Documentation Submitted (if known)

**c31509001**

Authorized Business Entity Representative's Name

**Robin Morrison**

Authorized Business Entity Representative's Signature



Business Entity Name

**Gainesville License Office**

Date

**05/12/2023**

E-Verify MOU Company ID Number

**835682**

Email Address

**rsmorrison41@gmail.com**

**EXHIBIT F Continued**

Complete the Section that applies below.

**SECTION A – NON-COMPANY ENTITY**

I certify that Gainesville License Office currently **DOES NOT MEET**  
(Entity Name)

the definition of a company as defined in Section 34.600, RSMo, but that if awarded a contract and the entity's business status changes during the life of the contract to become a "company" as defined in Section 34.600, RSMo, and the entity has ten or more employees, then, prior to the delivery of any services and/or supplies as a company, the entity agrees to comply with, complete, and return Section C to the Department of Revenue at that time.

Authorized Representative's Name

Authorized Representative's Signature

Entity Name

Date

**SECTION B – COMPANY ENTITY WITH LESS THAN TEN EMPLOYEES**

I certify that Gainesville License Office **MEETS** the definition of a  
(Entity Name)

company as defined in Section 34.600, RSMo, and currently has less than ten employees but that if awarded a contract and if the company increases the number of employees to ten or more during the life of the contract, then said company shall comply with, complete, and return Section C to the Department of Revenue at that time.

Authorized Representative's Name  
**Robin Morrison**

Authorized Representative's Signature  
*Robin Morrison*

Company Name  
**Gainesville License Office**

Date  
**05/12/2023**

**SECTION C – COMPANY ENTITY WITH TEN OR MORE EMPLOYEES**

I certify that \_\_\_\_\_ **MEETS** the definition of  
(Company Name)

a company as defined in Section 34.600, RSMo, has ten or more employees, and is not currently engaged in a boycott of goods or services from the State of Israel; companies doing business in or with Israel or authorized by, licensed by, or organized under the laws of the State of Israel; or persons or entities doing business in the State of Israel as defined in Section 34.600, RSMo. I further certify that if the company is awarded a contract for the services and/or supplies requested herein said company shall not engage in a boycott of goods or services from the State of Israel; companies doing business in or with Israel or authorized by, licensed by, or organized under the laws of the State of Israel; or persons or entities doing business in the State of Israel as defined in Section 34.600, RSMo, for the duration of the contract.

Authorized Representative's Name

Authorized Representative's Signature

Company Name

Date

**Double-check your work! Ensure all required forms and fields have been completed.**





STATE OF MISSOURI  
DEPARTMENT OF REVENUE  
REQUEST FOR BEST AND FINAL OFFER (BAFO)  
FOR REQUEST FOR PROPOSAL (RFP)

BAFO REQUEST NO.: 001  
 SOLICITATION/OPPORTUNITY (OPP) NO.: RFPDOR230081  
 TITLE: Location License Office Gainesville License Office  
 ISSUE DATE: 05/10/2023  
 BAFO RESPONSE MUST BE RETURNED BY: 06/20/2023  
 REQ NO.:  
 BUYER: Tara Ronimous  
 PHONE NO.: (573) 751-2145  
 EMAIL: Tara.Ronimous@dor.mo.gov  
 AT 2:00 PM CENTRAL TIME (END DATE)

BAFO RESPONSE MUST BE SUBMITTED ELECTRONICALLY TO: TARA.RONIMOUS@DOR.MO.GOV  
 MAILED, COURIER, OR HAND-DELIVERED RFP RESPONSE WILL NOT BE ACCEPTED.

CONTRACT PERIOD: Effective Date of Contract through five (5) years.

DELIVER SUPPLIES/SERVICES FOB (Free On Board) DESTINATION TO THE FOLLOWING ADDRESS:

<b>DELIVER SUPPLIES/SERVICES          FOB (Free on Board) DESTINATION TO:</b>  <b>Gainesville, MO</b>	<b>DELIVER SERVICES FOR:</b> Department of Revenue P.O. Box 311 Jefferson City, MO 65105
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The vendor hereby declares understanding, agreement and certification of compliance to provide the items and/or services, at the prices quoted, in accordance with all requirements and specifications contained herein and the Terms and Conditions Request for Proposal (Revised 11/09/2022.) as modified by any previously issued RFP addendums and by this and any previously issued BAFO requests. The vendor further agrees that the language of the original RFP as modified by any previously issued RFP addendums and by this and any previously issued BAFO requests shall govern in the event of a conflict with his/her proposal. The vendor further agrees that upon receipt of an authorized purchase order from the Department of Revenue or when a Notice of Award is signed and issued by an authorized official of the State of Missouri, a binding contract shall exist between the vendor and the State of Missouri.

**SIGNATURE REQUIRED**

<b>VENDOR NAME</b> Gainesville License Office	<b>MissouriBUYS System ID (See vendor profile – main information screen)</b> RFPDOR230081
<b>MAILING ADDRESS</b> Po Box 59	
<b>CITY, STATE, ZIP CODE</b> Gainesville Mo 65655	
<b>CONTACT PERSON</b> Robin Morrison	<b>EMAIL ADDRESS</b> gainesvilleagentoffice@dor.mo.gov
<b>PHONE NUMBER</b> (417) 679-0280	<b>FAX NUMBER</b> (417) 679-0279
<b>VENDOR TAX FILING TYPE WITH IRS (CHECK ONE)</b>	
<input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Individual <input type="checkbox"/> State/Local Government <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> IRS Tax Exempt	
<b>AUTHORIZED SIGNATURE</b> 	<b>DATE</b> 06/27/2023
<b>PRINTED NAME</b> Robin Morrison	<b>TITLE</b> agent



**BEST AND FINAL OFFER (BAFO) # 001 to RFPDOR230081**

**TITLE:** Location License Office     Gainesville License Office

**CONTRACT PERIOD:**     Effective Date of Contract through five (5) years.

**EXHIBIT A**

**D-2     Ownership of the Entity submitting this proposal.**

Identify the names of all members, partners, officers, individuals, and entities with an ownership interest in the entity submitting this RFP proposal, and their respective ownership interests. If additional space is needed attach supplemental documentation.

If the entity as named in the vendor's bid proposal is owned in whole or any part by another entity, vendor must provide the state agency with the legal and binding operating agreement, partnership agreement, bylaws, or other similar document of each ownership-interest holding entity indicating all members, partners, officers, individuals, or entities with an ownership interest, including their respective ownership interests in the entity that has an ownership interest in the entity that has been named in the vendor's bid proposal.

Failure to provide the information specified will result in the vendor's proposed bid being deemed unresponsive and will not be scored or given consideration

<b>Ownership Interest and/or Percentage</b>	<b>Name of Member, Partner, Officer, Individual or Entity with an Ownership Interest</b>
100	Robin Morrison

**D-3     Officer(s)**

Identify the name(s) of all vendor's officer(s) (as defined in Attachment 3), and any officer(s) of any entity holding an interest in the vendor, Exhibit E, Section B must be completed for each officer. If additional space is needed attach supplemental documentation.

For all vendor's officer(s), and any officer(s) of any entity holding an interest in the vendor, Exhibit E, Section B must be completed for each officer listed here. If additional space is needed attach supplemental documentation:

Officer Name Robin Morrison
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Officer Name
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Officer Name
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Officer Name
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Officer Name
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Officer Name
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