



Fort Mill School District

Addendum 1

Solicitation Number	20-040
Solicitation Issue Date	5/21/2021
Procurement Officer	Karen U Taylor
Phone	(803) 548-8430
E-Mail Address	taylorku@fortmillschools.org

DESCRIPTION: Sale of Technology Surplus

The Term "Offer" Means Your "Bid" or "Proposal".

SUBMIT OFFER BY (Opening Date/Time): 6/14/21 at 10:00 AM – EST See "Deadline for Submission of Offer" provision

QUESTIONS MUST BE RECEIVED BY: 6/3/21 at 10:00 AM - EST NUMBER See "Questions from Offerors" provision

OF COPIES TO BE SUBMITTED: One (1) original ON-LINE (see below)

CONFERENCE TYPE: Pre-Bid Meeting DATE & TIME: N/A LOCATION: N/A

**Please submit your sealed offer on-line
ON-LINE AT:
<http://www.fortmillschools.org/departments/procurement/> under "Current Bids
and RFP's"
Video of opening bids will be posted at www.fortmillschools.org/departments/procurement**

<small>(As appropriate, see "Conferences - Pre-Bid/Proposal" & "Site Visit" provisions)</small>	
AWARD & AMENDMENTS	Award will be posted at the physical address stated above on or about 6/4/2021 The award will be posted at the following web address: http://www.fortmillschools.org
You must submit a signed copy of this form with your offer. By submitting a bid or proposal, you agree to be bound by the terms of the solicitation. You agree to hold your offer open for a minimum of sixty (60) calendar days after the opening date.	
NAME OF OFFEROR <small>(Full legal name of business submitting the offer)</small>	OFFEROR'S TYPE OF ENTITY: (Check one) <ul style="list-style-type: none"> <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporate entity (not tax-exempt) <input type="checkbox"/> Tax exempt corporate entity <input type="checkbox"/> Government entity (federal, state, or local) <input type="checkbox"/> Other <small>(See "Signing your Offer" provision)</small>
AUTHORIZED SIGNATURE <small>(Person signing must be authorized to submit binding offer to enter contract on behalf of Offeror named above.)</small>	<small>(See "Signing your Offer" provision)</small>
TITLE <small>(Business title of person signing above)</small>	
PRINTED NAME <small>(Printed name of person signing above)</small>	DATE SIGNED
Instructions regarding Offeror's name: Any award issued will be issued to, and the contract will be formed with, the entity identified as the offeror above. An offer may be submitted by only one legal entity. The entity named as the offeror must be a single and distinct legal entity. Do not use the name of a branch office or a division of a larger entity if the branch or division is not a separate legal entity, <i>i.e.</i> , a separate corporation, partnership, sole proprietorship, etc.	
STATE OF INCORPORATION <small>(If offeror is a corporation, identify the State of Incorporation.)</small>	
TAXPAYER IDENTIFICATION NO. <small>(See "Taxpayer Identification Number" provision)</small>	

PAGE TWO

(Return Page Two with Your Offer)

HOME OFFICE ADDRESS (Address for offeror's home office / principal place of business)	NOTICE ADDRESS (Address to which all procurement and contract related notices should be sent.) (See "Notice" clause)
	_____ Area Code - Number - Extension Facsimile
	_____ E-mail Address

PAYMENT ADDRESS (Address to which payments will be sent.) (See "Payment" clause)	ORDER ADDRESS (Address to which purchase orders will be sent) (See "Purchase Orders and "Contract Documents" clauses)
_____ Payment Address same as Home Office Address _____ Payment Address same as Notice Address (check only one)	_____ Order Address same as Home Office Address _____ Order Address same as Notice Address (check only one)

ACKNOWLEDGMENT OF AMENDMENTS							
Offerors acknowledges receipt of amendments by indicating amendment number and its date of issue. (See "Amendments to Solicitation" Provision)							
Amendment No.	Amendment Issue Date	Amendment No.	Amendment Issue Date	Amendment No.	Amendment Issue Date	Amendment No.	Amendment Issue Date

DISCOUNT FOR PROMPT PAYMENT (See "Discount for Prompt Payment" clause)	10 Calendar Days (%)	20 Calendar Days (%)	30 Calendar Days (%)	_____ Calendar Days (%)
--	----------------------	----------------------	----------------------	-------------------------

--	--

Minority Participation: Are you a SC Certified Minority Vendor <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, SC Certification # _____ Are you a Non SC Certified Minority Vendor <input type="checkbox"/> Yes <input type="checkbox"/> No	
--	--

End of Page Two

Addendum 1
Need to correct:

The model number for the All In One is wrong on the parts list. It should be a Dell Optiplex 3030 All In One instead of a 3040 All In One.

****Make sure you acknowledged this addendum on page 2 of bid package.**