

Event Details

PeopleSoft Strategic Sourcing

Event ID	Format	Type	Page
32110-0000013161	Sell	RFx	1
Event Round	Version		
1	2		
Event Name			
SWC 437 WIC Infant Formula			
Start Time		Finish Time	
02/22/2024 14:00:00 CST		03/25/2024 14:00:00 CDT	

Bidder: PUBLIC EVENT DETAILS

Submit To: General Services - CPO
312 ROSA L PARKS AVE
3rd Floor
NASHVILLE TN 37243

Contact: United States
Sondra Parks
Phone: 615/532-6357
Email: sondra.parks@tn.gov

Event Currency: US Dollar
Bids allowed in other currency: No

Event Description

VERSION 2 OF THIS EVENT WAS CREATED TO ADD AMENDMENT 3 WHICH DOCUMENTS TWO LOGISTICAL CHANGES: 1) UPDATE THE SOLICITATION COORDINATOR FROM SONDRA PARKS TO TREY NORRIS; AND 2) UPDATE THE TEAMS MEETING LINK AND ROOM LOCATION FOR THE PUBLIC BID OPENING. NO OTHER CHANGES HAVE BEEN MADE TO TERMS AND CONDITIONS, AND THERE HAVE BEEN NO CHANGES TO SPECS, PRICING WORKSHEET, OR ANY OTHER EVENT DETAILS OR ATTACHMENTS

NOTE: This is an Invitation to Bid notification for SWC 437 WIC Infant Formula.

The purpose of this Invitation to Bid (ITB) is to establish a Statewide Contract, which will provide a rebate for iron-fortified infant milk-based and soy-based formulas in all physical forms (liquid concentrate, powder, and ready-to-feed) in their contract brand infant formula product line through the State Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) retail distribution system.

Solicitation Coordinator: Trey Norris, Trey.Norris@tn.gov, 615-762-6823

READ THE ENTIRE BID, including the Event Details, Specifications, and Terms and Conditions and any other attachments.

If the Review and bid on this event link included in the e-mail notification does not work, please go to <http://www.edison.tn.gov/> and click the link to the Supplier Portal Home Page. Log in with your supplier ID and password in order to search bid opportunities.

NOTE: Internet Edge and Firefox are the recommended browsers to access the Supplier Portal and bid on events. Need help with EDISON? Call the Edison HELP Desk at 866-376-0104 or 615-741-4357.

Please do not wait until the last day to POST YOUR BID. The Edison system will sign you out after 30 minutes of inactivity. Your password expires EVERY 90 DAYS. It is the responsibility of the Edison User (bidder/supplier) to maintain their own profile information (Email address, phone numbers, address or contacts) and to continue to keep it current by logging into the Supplier Portal and making changes as needed.

Supplier Portal link: <http://www.edison.tn.gov> (Supplier Portal Home Page)
Central Procurement Office Website: <https://www.tn.gov/generalservices/procurement> (Supplier Information Page). The website is constantly being updated with information to assist the agencies and suppliers. You are encouraged to visit the website frequently.

General Comments

- This is an Invitation to Bid notification for SWC 437 WIC Infant Formula.

General Questions

Question	UOM	Best	Worst	Response
Please complete the attached form, included with the Terms and Conditions document, and attach all pertinent documentation regarding your company's efforts to achieve diversity business participation. This information must be submitted with the bid document and monthly thereafter until a reasonable level of diversity business participation is achieved. Confirm below that you have completed this attached form by choosing, "Yes."				<input type="text"/>

Required: Yes Mandatory ResponseNo

Event Details (cont.)

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Response Comments

Question	UOM	Best	Worst	Response
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Please upload the completed SWC 437 Pricing Worksheet.

Required: Yes Mandatory ResponseNo

A file attachment is required to satisfy this question.
Your bid will need to be edited online to include attachment responses.
Response Comments

Please provide the product name of the goods included in this bid:

Required: Yes Mandatory ResponseNo

Response Comments

We ask that you take a few short minutes to complete this survey. The purpose of this survey is to capture Respondents' assessments of CPO procurement processes. Your responses will remain anonymous, and will have no bearing or consideration on contract award.

<https://www.surveymonkey.com/r/stateoftncpocustomer>

Required: No Mandatory ResponseNo

Response Comments

The Respondent affirms the following statement, as required by the Iran Divestment Act Tenn. Code Ann. § 12-12-111: "By submission of this response, each Respondent and each person signing on behalf of any Respondent certifies, and in the case of a joint response each party thereto certifies as to its own organization, under penalty of perjury, that to the best of its knowledge and belief that each Respondent is not on the list created pursuant to Tenn. Code Ann. § 12-12-106." For reference purposes, the list is currently available online at:
<https://www.tn.gov/general-services/procurement/central-procurement-office--cpo-/library-public-information-library.html>

Required: Yes Mandatory ResponseNo

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Response Comments

Question	UOM	Best	Worst	Response
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Please attach documentation that reflects you are registered with the Department of Revenue for sales and use tax, as stated in the Terms and Conditions. If you are exempt, please provide a copy of the communication from the Department of Revenue supporting this exemption.

Required: Yes Mandatory Response: No

Response Comments

I (we) agree to strictly abide by all the statutes and terms contained in the rules of the Department of General Services, Central Procurement Office, which are by reference made a part hereof, in addition to the special terms, conditions and specifications embodied in the invitation to bid.

IMPORTANT: By Selecting YES, the bidder certifies compliance with the above and further certifies that this bid is made without collusion or fraud.

Yes

Required: Yes Mandatory Response: Yes

Response Comments

Please answer yes or no to the following. If YES, describe using additional pages and attach to the Response including any relevant details:

(a) is the Respondent presently debarred, suspended, proposed for debarment, or voluntarily excluded from covered transactions by any federal or state department or agency;

(b) has the Respondent within the past three (3) years, been convicted of, or had a civil judgment rendered against the contracting party from commission of fraud, or a criminal offence in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or grant under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) is the Respondent presently indicted or otherwise

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Bids allowed in other currency: No

criminally or civilly charged by a government entity (federal, state, or local) with commission of any of the offenses detailed above; and

(d) has the Respondent within a three (3) year period preceding the contract had one or more public transactions (federal, state, or local) terminated for cause or default.

Required: Yes Mandatory Response: No

Response Comments

The respondent shall indicate whether or not they plan to sub-contract:

No: The respondent does not anticipate using a sub-contractor at this time and agrees to submit a request to subcontract during the contract period prior to using a subcontractor.

Yes: The bidder shall list the subcontractor(s):

Attach list of additional subcontractors to the bid, including the following for each subcontractor.

- List the Sub-Contractor's Name
- List the Sub-Contractor's Address
- List the Sub-Contractor's Contact Person
- List the Sub-Contractor's Phone Number

Required: Yes Mandatory Response: No

Response Comments

Associated Terms:

The Contractor shall not assign this Contract or enter into a subcontract for any of the goods or services provided under this Contract without obtaining the prior written approval of the Central Procurement Office. Notwithstanding any use of approved subcontractors, the Contractor shall be the prime contractor and shall be responsible for all work provided.

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Event Currency: US Dollar
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Question	UOM	Best	Worst	Response
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Please upload your nationally published wholesale price list effective on the day of bid opening for each type and form of infant formula in your product line.

Required: Yes Mandatory ResponseNo

A file attachment is required to satisfy this question.
Your bid will need to be edited online to include attachment responses.
Response Comments

Please list the following information:

- List the Contract Administrator's Name
- List the Contract Administrator's Address
- List the Contract Administrator's Phone Number
- List the Respondent's Toll Free Phone Number
- List the Contract Administrator's Pager or Cell Number
- List the Contract Administrator's Email Address
- List the Respondent's Website

Required: Yes Mandatory ResponseNo

Response Comments

Service Experience, Time in Business, Contracts

List the length of time respondent's company has been in business. A respondent must have occupied a bona fide place of business for at least one year with suitable equipment, supplies and a trained staff capable of performing the services requested.

List the description of services. Please enter the information for three (3) comparable contracts on-going or completed within the last two (2) years.

- Comparable Contract
- List Name/Address of Comparable Contract
- List the Contact Person
- List the Phone Number
- List the Contact Person's Email Address

Required: Yes Mandatory ResponseNo

Event Details (cont.)

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United States

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Response Comments

Associated Terms:

A respondent must have occupied a bona fide place of business for at least one (1) year with suitable equipment, supplies and a trained staff capable of performing the services requested. A respondent must furnish satisfactory evidence of successful completion of comparable contracts for at least three (3) customers within the past two (2) years and any other evidence required and requested in order to establish evidence of its ability to provide services in accordance with the terms and conditions and specifications.

Please indicate bidder meets compliance with: 1. Registration with the Secretary of the United States, Department of Health and Human Services under the Federal Food, Drug, and Cosmetic Act (21 U.S.C. §301 et seq.) 2. All federal regulations pertaining to WIC. 3. The Federal Food, Drug, and Cosmetic Act and regulations issued pursuant to such act. 4. The Tennessee Department of Health's requirement that all infant formulas identified will carry the label of the Contractor.

Yes

Required: Yes Mandatory Response:Yes

Response Comments

Event Details (cont.)

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Line Details

Line: 1 **Item ID:** **Line Qty:** 1 **UOM:** Each **Bid Qty:**

Required: Yes **Reserve Price:** No

Description: Please upload the completed SWC 437 Pricing Worksheet

Question	UOM	Best	Worst	Response
What is the unit price of this item?				<input type="text"/>

Required: Yes **Mandatory Response:** No

Response Comments

Event Details (cont.)

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Bidder Information

Firm Name:		
Name:	Signature:	Date:
Phone #:	Fax #:	
Street Address:		
City & State:	Zip Code:	
Email:		

Event Details (cont.)

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Bids allowed in other currency: No

Appendix A - Line Specifications

Line: 1 **Item ID:** **Line Qty:** 1 **UOM:** Each

Description: Please upload the completed SWC 437 Pricing Worksheet

Item Specifications

Manufacturer:			
Mfg Item ID:			
Item Length:	0	Item Height:	0
Item Width:	0	Dimension UOM:	
Item Volume:	0	Volume UOM:	
Item Weight:	0	Weight UOM:	
Item Size:		Item Color:	

Shipping Information

Schedule:	1	Ship To:	
Quantity:	1		
Due Date:	03/05/2024		
Freight Terms:			
Ship Via:			

Event Details (cont.)

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Appendix B - Terms & Conditions

1. The undersigned acknowledges that all submitted information and documentation will become the property of the state of Tennessee. The undersigned also affirms that the information given above is true, accurate, and includes pertinent information necessary to identify and explain the operation of this organization to the best of my knowledge and is in no way misleading.
2. Should any data change in the future, the Supplier agrees to immediately submit the correct information electronically through the State's Supplier Portal.

If the information will be submitted in writing please mail to the following address:

Department of Finance and Administration
312 Rosa L. Parks Ave.
21st Floor Tennessee Tower
ATTN: Supplier Maintenance
Nashville, TN 37243

3. No person on the grounds of handicap or disability, age, race, color, religion, sex, national origin, creed, or any other classification protected by Federal and/or Tennessee State constitutional and/or statutory law shall be excluded from participation in, or denied benefits of, or be otherwise subjected to discrimination in the performance of the Contract or in the employment practices of the Contractor. The Contractor shall, upon request, show proof of such non-discrimination, and shall post in conspicuous places, available to employees and applicants, notices of non-discrimination.

Last Updated: 08/30/2016