Date: December 12, 2014
To: Interested Organizations/Agencies
From: Lighthouse for Children, Inc. (LFC)
Re: Furniture

Bid Due: Tuesday, December 23, 2014 at or before 12:00 noon
Quotation No. 2014-1519

**Purpose for the Request for Quotation (RFQ):**

LFC is seeking a qualified contractor that has the capabilities and experience necessary to provide additional Furniture, Fixtures and Equipment (FF&E) for the LFC facility currently under construction in downtown Fresno. The qualified contractor shall have the capability to provide delivery and installation at prevailing wage.

**Scope of Services**
The scope of services shall be to provide the FF&E, per Attachment “C”, as follows:

1. One hundred (100) interlocking stackable meeting room chairs, including delivery and installation.

2. Chair dollies capable of handling one hundred (100) interlocking, stackable meeting room chairs, including delivery and installation.

3. One (1) standard conference room table, capable of seating up to 10 people, including delivery and installation.

4. Ten (10) Conference room chairs, including delivery and installation.

5. Two (2) sets of Lactation room furniture, including delivery and installation.

Experienced contractors interested in providing the additional FF&E for LFC are encouraged to submit a quotation. The contractor selected will have demonstrated understanding in providing similar services, and must be exceptionally capable of producing the desired goods and services in a highly professional, timely and cost-conscious manner.
Quotation Submission Requirements:

The bid must be submitted in the following format and meet these requirements:

- The entire bid must not exceed six (6) typed written pages, including the cover letter. Separate brochures and/or specification sheets will be allowed.
- Bids must be accompanied with a cover letter on agency letterhead with the following:
  - Basic information about your agency
  - Three references
- Bid pricing must be filled in on Attachment “A”, Request for Quotation, Standard Form 1. Price sheets may be attached to this form.
- Attachment “B”, W-9 must be filled out, signed and returned.

Questions on the Request for Quotation:

Any questions about this RFQ must be e-mailed to Ari Martinez, Contracts & Compliance Officer hmartinez@first5fresno.org

Questions will be accepted until Friday, December 19, 2014 at or before 5:00 p.m.

Questions and responses will be posted on the F5FC website by 5:00 p.m. on Monday, December 22, 2014.

Submission Instructions:

Quotations must be received in the Lighthouse for Children, Inc. Office by mail, hand-delivered or e-mailed no later than, **Tuesday, December 23, 2014 by 12:00 noon**. Please address your quotation to:

Ari Martinez  
Lighthouse for Children, Inc.  
550 E. Shaw Avenue, Suite 215  
Fresno, CA 93710  
hmartinez@first5fresno.org

Confidentiality of Responses:

Lighthouse for Children, Inc. cannot guarantee the confidentiality of information submitted by the organization/agency. In the event that Lighthouse for Children, Inc. receives a request for records or court order that Lighthouse for Children, Inc. reasonably determines compels its disclosure of the quotation, Lighthouse for Children, Inc. shall provide such records as it deems appropriate. All materials submitted as part of an applicant’s response to this quotation become the property of Lighthouse for Children, Inc.
Commission's Standard Policies:

All Service Providers and vendors contracting with the Lighthouse for Children, must agree to comply with the First 5 Fresno County Commission’s Standard Policies, Attachment “D”. A complete copy of all Commission policies and/or guidelines is located on the Commission’s website, www.first5fresno.org.

Miscellaneous Information:

1. Issuance of this RFQ does not constitute a commitment by the Board to award a contract. The Board reserves the right to reject any or all quotations received in response to this RFQ, or to cancel this RFQ if it is in the best interest of the Board to do so.

2. By submitting a quotation, proposers authorize Lighthouse for Children, Inc. staff to verify any or all information and/or references given in the quotation.

3. Lighthouse for Children, Inc. staff reserves the right to approve all subcontractors proposed by the primary contractor. Approval is based on the subcontractor contract language and budget with the primary contractor.

4. Lighthouse for Children, Inc. staff reserves the right, after contract award, to amend the resulting contract as needed throughout the term of the contract to best meet the needs of all parties.

5. As of the issue date of this RFQ and continuing through the notification of the award, all Lighthouse for Children, Inc. staff and Board Members are specifically directed not to hold any unscheduled meetings, conferences, or technical discussions regarding this RFQ with prospective service providers. “Off the record” contacts can potentially taint the Boards decision-making process. Please do not attempt to initiate this type of communication.

6. The contact person for each quotation, whether selected for award or denied, will be notified in writing of the decision. Upon notification of an award, representatives of the firm will meet with staff to finalize a detailed scope of work and budget.

7. Upon notice by F5FC of an award, any applicant may file a written protest regarding a potential procurement by the Commission. The protest should provide evidence that the award violated F5FC’s procurement procedures or state law. Mere disagreement with the Commission or Executive Director’s decision shall not be the basis for a successful protest. The protest shall be filed with the Executive Director no later than forty-eight (48) hours before the day of the meeting at which the Commission is scheduled to award the subject contract. The protest shall be in writing addressed to the Executive Director and contain the exact basis for the protest, and proof that the protester is a viable and responsible provider of the supplies, equipment or services sought.

8. No formal Bidders’ Conference will be held. Questions may be directed to the Contracts & Compliance Officer as noted below.

9. Insurance. On or before the Effective Date of any agreement, Contractor shall furnish to the Commission satisfactory proof of the required insurance (Certificates of Insurance), which shall include a commitment by Contractor’s insurers that they
will mail notice of any cancellation or reduction of coverage below the amounts herein required by the Commission, at least thirty (30) days prior to the effective date of such cancellation or change. Such required insurance shall include:

a) **General Liability.** Comprehensive general liability coverage of at least one million dollars ($1,000,000) per occurrence for bodily injury, personal injury and property damage. If commercial general liability insurance or other form with a general aggregate limit is used, either the general aggregate limit shall apply separately or the general aggregate limit shall be twice the required occurrence limit (i.e., $2,000,000).

b) **Automobile Liability.** Comprehensive automobile liability coverage with a combined single limit of at least one million dollars ($1,000,000) per accident for bodily injury and property damage on all vehicles operated under Contractor’s authority, whether or not owned by Contractor.

c) **Worker’s Compensation.** Workers’ compensation insurance in accordance with the California Labor Code.
Attachment A

Standard Form 1
REQUEST FOR QUOTATION

1. REQUEST NO. 2014-1507
2. DATE ISSUED 12/12/2014
3. REQUESTING DEPARTMENT. Business, Operations

4a. ISSUED BY Ari Martinez
4b. FOR INFORMATION CALL

STREET ADDRESS

550 E. Shaw Ave., Ste. 215
Fresno, CA 93710

TELEPHONE NUMBER

559 241-6514

5. DELIVER BY (Date)

6. DELIVERY MODE

7. TO:

a. NAME
b. COMPANY

8. DESTINATION

a. NAME OF CONSIGNEE

7. TO:

a. NAME
b. COMPANY

c. STREETF ADDRESS

7. TO:

c. STREETF ADDRESS

d. CITY

8. DESTINATION

a. NAME OF CONSIGNEE

7. TO:

c. STREETF ADDRESS

d. CITY

e. STATE
f. ZIP CODE

c. CITY

e. STATE
f. ZIP CODE

c. CITY

e. STATE
f. ZIP CODE

c. CITY

e. STATE
f. ZIP CODE

9. PLEASE FURNISH QUOTATIONS TO THE ISSUING CONTACT IN BLOCK 4a ON OR BEFORE CLOSE OF BUSINESS (Date)

IMPORTANT: This is a request for information and quotations. If you are unable to quote, please so indicate on this form and return it to the address in Block 4b. This request does not commit First 5 Fresno County to pay any costs incurred in the preparation of the submission of this quotation or to contract for supplies or service. Supplies are of domestic origin unless otherwise indicated by the person authorized to provide the quote. Any representations and/or certifications attached to this Request for Quotation must be completed by the person authorized to provide the quote.

10. SCHEDULE (Include applicable Federal, State and local taxes)

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<th>SUPPLIES/ SERVICES</th>
<th>QUANTITY</th>
<th>UNIT</th>
<th>UNIT PRICE</th>
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11. DISCOUNT FOR PROMPT PAYMENT

a. 10 CALENDAR DAYS (%)  b. 20 CALENDAR DAYS (%)  c. 30 CALENDAR DAYS (%)  d. CALENDAR DAYS

NUMBER

PERCENTAGE

12. NAME AND ADDRESS OF QUOTER

13. SIGNATURE OF PERSON AUTHORIZED TO SIGN QUOTATION

14. DATE OF QUOTATION

15. NOTE: Additional provisions and representations are not attached.

16. SIGNER

<table>
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<th>a. NAME (Type or print)</th>
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<th>d. STATE</th>
<th>e. ZIP CODE</th>
<th>f. TITLE (Type or print)</th>
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STANDARD FORM 1
Attachment B

W – 9
Form W-9
Request for Taxpayer Identification Number and Certification

Name (as shown on your income tax return)

Business name, if different from above

Check appropriate box: [ ] Individual/Sole proprietor [ ] Corporation [ ] Partnership
[ ] Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership)
[ ] Other (see instructions) [ ] Exempt payee

Address (number, street, and apt. or suite no.)

City, state, and ZIP code

Requester’s name and address (optional)

List account number(s) here (optional)

Part I  Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II  Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here  Signature of U.S. person [ ]

Date [ ]

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners’ share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester’s form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

• An individual who is a U.S. citizen or U.S. resident alien,
• A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
• An estate (other than a foreign estate), or
• A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners’ share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

• The U.S. owner of a disregarded entity and not the entity,
Attachment “C”
Furniture, Fixtures and Equipment (FF&E)
Specifications Sheet

Note: please provide quotations for similar or alike products.

Ganging Stacking Chair (100 each)

Description: Armless ganging chair with polypropylene seat and back

- Frame is made from durable solid steel rod.
- Polypropylene seat and backs
- Armless models are available with integrated ganging.
- Armless interlocking feature that allows chairs to be ganged together in rows.
- Similar to pictured.

Chair Dolly (3 each)

Description: Dolly for stacking chairs up to 40 high, similar to pictured.
Conference Room Table (1 each)

Description: Accommodate up to 10 chairs. Amber color finish, square, cylinder or thin panel base. Table does not include electrical or data plug-ins on top. Similar to pictured.

Conference Room Seating (10 each)

Description: Similar to pictured and described below.

- Mesh back
- Fabric seat
- Platinum frame
- Synchro tilt with 4-position lock
- Seat slider
- Tilt tension control
- Adjustable height arms
Lactation Room Components

Glider and Ottoman (2 each)
Description: Basic lactation mother/baby glider/rocker with matching ottoman similar to pictured. Color coordinated with other components.

Seating Bench (2 each)
Description: 3 seat bench that has broad appeal with contemporary style similar to pictured. Color coordinated with other components.

Approximate Size - 64.5"W x 21.5"D x 17"H
Changing Table (2 each)

Description: Basic changing table with storage shelving similar to pictured. Color coordinated with other components.

Floor Lamp (2 each)

Description: Contemporary floor lamp similar to pictured. Color coordinated with other components.
Occasional Table (2 each)

Description: Contemporary style similar to pictured. Color coordinated with other components.

Floor Rug (2 each)

Description: Contemporary styling and color coordinated with other components. Approximately 5’ x 8’ size. Similar to pictured.
Attachment M
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Overview of First 5 Fresno County

At First 5 Fresno County, we want all children to thrive. We are an advocacy organization that invests resources and supports efforts to improve the lives of children ages 0-5 and their families.

First 5 Fresno County was established subsequent to California voters passing Proposition 10, the "California Children and Families First Act of 1998." The Act provides for a 50 cent tax on tobacco products. The monies collected are used to fund early childhood education programs, including parent education, health and child care programs that promote early childhood development from prenatal through age 5 and support anti-smoking efforts. County Commissions were established by each County’s governing board. Commissions are responsible for adopting a strategic plan prior to the allocation of any funding. The 2013-2020 Strategic Plan can be found on the First 5 Fresno County website.

First 5 Fresno County’s Vision

All children 0-5 will achieve optimal social, emotional, physical and cognitive development.

First 5 Fresno County’s Mission

To be a catalyst for creating an accessible and effective network of quality services for young children (0-5) and their families.
**Standard Policies**

**Administrative**

**Breastfeeding Friendly (BFF) Policy**

The Commission embraces the importance of supporting and encouraging mothers to breastfeed their babies for as long as possible and has adopted a Breastfeeding Friendly (BFF) Policy to be in place in any agreement between the Commission and programs and services funded by the Commission.

Prior to the disbursement of any funds, all Service Providers and vendors contracting with the Commission must agree to comply with the Commission’s BFF Policy, which requires the display of the Commission’s Breastfeeding Friendly (BFF) logo in a highly visible location such as the lobby/reception area, front window or front entrance of the agency’s office or service location. By displaying the BFF logo, agencies promote awareness and support of California Civil Code - Section 43.3 - a mother’s right to breastfeed in public.

*Note: A complete copy of the Commission’s Breastfeeding Friendly (BFF) Policy is located on the Commission website.*

**Faith-based Funding Policy**

The Commission embraces the value of an active partnership between families, Service Providers, civic leaders, the faith-based community, local business and the community at large, and honors and respects the diversity of our community.

The Commission acknowledges the right of individuals to participate in Commission funded programs without coercion or unsolicited exposure to faith. Therefore, the Commission will not fund/support religious activities and/or activities that appear to promote a particular religious belief over others by way of its funding practices.

Service Providers and program recipients are expected to comply with all the legal requirements and restrictions imposed upon government funded activities as articulated in the California Constitution and the Religion Clauses of the First Amendment to the United States Constitution.

*Note: A complete copy of the Commission’s Faith-based Funding Policy is located on the Commission website.*

**Supplanting Policy**

No Commission funds shall be used to supplant (take the place of or replace) state or local General Fund money for any purpose. This prohibition does not apply to federally or privately funded programs.

*Note: A complete copy of the Commission’s Supplanting Policy is located on the Commission website.*
Tobacco Policy

The Commission recognizes the importance of protecting the health and safety of children, families, employees, visitors and others, and has adopted a Tobacco Policy requiring a tobacco-free provision be present in any agreement between the Commission and programs funded by the Commission.

All programs requesting funding from the Commission must provide a written copy of an established tobacco-free policy prior to the disbursement of granted funds. The tobacco-free policy must apply to all employees, contractors, service employees, visitors and others.

Note: A complete copy of the Commission’s Tobacco Policy is located on the Commission website.

Fiscal

Electronic Funds Transfer (EFT) – Automated Clearing House (ACH) Payments

In lieu of issuing checks and mailing remittance, the Commission utilizes EFT – ACH payments.

EFT is a system of transferring money from one bank account directly to another without paper money changing hands.

ACH payment is the method of electronic remittance to individuals or entities that are made electronically within the banking system. ACH payments have many benefits. They eliminate the need to print and mail checks, ensure payees receive payments by a specific date, provide an efficient, cost effective, and payee-friendly means of making payments, are environmentally friendly due to the reduced use of paper, postage, office supplies, processing time, and storage space; and provide payees with an option to receive payment quickly.

The Commission will make all contract payments through ACH. Within 15 days of the initial contract award date or submission of a financial report (invoice), Contractors must submit or have already submitted an EFT authorization form to the Commission. The form is located on the Commission website.

It is the responsibility of the Contractor to ensure the ACH information submitted to the Commission is accurate and complete. Failure to maintain accurate and complete information may result in delayed payments.