



INVITATION FOR BID (IFB) QUOTE BID

Bid Number:	26-32	Issue Date:	February 18, 2026
Commodity Description:	Veterinary Models	Terms:	NET 30
FOB:	ASU	Bid Opening Date and Time:	Tuesday, March 17, 2026 2:00 p.m. CST

PROCUREMENT CONTACT INFORMATION

Name:	Lisa Glasco, CPCP, CPPB, CPPO, NIGP-CPP, APO	Phone:	870-972-2028
Title:	Director of Procurement Services	Email:	lglasco@astate.edu

MAILING ADDRESS:

Non-USPS Delivery Address

Arkansas State University
Procurement Services
c/o Central Receiving
2713 Pawnee
State University, AR 72467

USPS Delivery Address

Arkansas State University
Procurement PO Box 1860
State University, AR 72467

Instructions:

- Bids should be submitted by the time and date specified above.
- The Prospective Contractor should provide the information below.
- ***This IFB must be sealed and mailed to the mailing address above.***
- Terms and Conditions governing this request for bid can be found at <http://www.astate.edu/a/procurement>

PROSPECTIVE CONTRACTOR INFORMATION

Company Name: _____	
Name (type or print): _____	Title: _____
Address: _____	
City: _____	State: _____ ZIP Code: _____
Telephone Number: _____	Fax Number: _____
E-Mail Address: _____	
Signature: _____ <i>Use ink only.</i>	

Arkansas State University is an Equal Opportunity Employer

INTERGOVERNMENTAL/COOPERATIVE USE OF PROPOSAL AND CONTRACT: In accordance with Arkansas Code §19-11-249, this bid and resulting contract are available to any college or university in Arkansas that wishes to utilize the services of the selected proposer, and the proposer agrees that they may agree as provided in this bid.



SECTION 1 – GENERAL INFORMATION AND INSTRUCTIONS

INTRODUCTION

Arkansas State University issues this Competitive Bid (CB) to obtain pricing for veterinary models and an X-Ray machine.

Direct all communications regarding this Solicitation to the Buyer on page one (1) of the CB.

TYPE OF CONTRACT

- A. As a result of this CB, the Department intends to award a contract to a single Contractor (see *Contractor Selection*).

CONTRACTOR SELECTION

- A. Award will be made to the responsible Prospective Contractor determined to have submitted the lowest Responsive Bid, based on the Total Annual Cost/Estimated Total Cost, etc. of the *Official Bid Price Sheet* submitted by the Prospective Contractor.
- B. A contract is not effective prior to the final award being made by the University; some contracts may be subject to Legislative review before the final award.

RESPONSE DOCUMENTS

- C. All bids **must** be submitted to the Buyer and by the submission deadline on page one (1) of the CB.
- D. *Competitive Bid Response Packet*
 - 1. Prospective Contractors **shall** utilize the *Competitive Bid Response Packet* attached to the Solicitation to submit their bids.
 - 2. The following are bid submission Requirements and **must** be submitted with the Competitive Bid Response Packet.
 - a. Signed *Bid Signature Page*; signature may be ink or digital.
 - b. Completed *Competitive Bid Response Packet*, which **must** be in English.
 - c. Completed *Official Bid Price Sheet* attached to the CB.
 - i. Pricing **must** be proposed in U.S. dollars and cents.
 - ii. Quantities stated are estimates only and are not guaranteed. The prospective contractor must bid a unit price based on the specified estimated quantity and unit of measure.
 - The University may order more or less than the estimated quantity on term contracts, and the Contractor **shall** sell to the Department quantities ordered at no more than the bid price.
 - iii. If pricing documents do not allow for accurate pricing, the Prospective Contractor should notify the Buyer at least seventy-two (72) hours before the bid opening time.
 - iv. Prices **must** be firm offers
 - v. Discount from list bids pricing is not acceptable unless requested elsewhere in the Solicitation.
 - vi. State and local sales taxes should not be included in the bid price.



- d. Copy of Contract and Grant Disclosure Forms and Combined Certifications for Contracting with the State of Arkansas.
- E. Prospective Contractors should not alter any language in the Solicitation document(s) or the *Official Bid Price Sheet* provided by the University.
- F. Prospective Contractors' bids cannot be altered or amended after the bid opening except as permitted by law or rule.
- G. As requested, Prospective Contractors **shall** provide clarification regarding the Prospective Contractor's bid response.

SECTION 2 – SPECIFICATIONS AND REQUIREMENTS

2.2 SPECIFICATIONS

- A. The commodity **must** have the capabilities and technology described below.

SECTION 3 – SOLICITATION TERMS AND CONDITIONS

ACCEPTANCE OF REQUIREMENTS

- 1. Bids submitted by Prospective Contractors determined to be non-responsible will be rejected.
- B. A single Prospective Contractor **must** be identified as the prime contractor.
 - 1. The prime Contractor **shall** be responsible for the resulting contract and jointly and severally liable with any of its subcontractors, affiliates, or agents to the University for the performance thereof.
- C. By submitting a bid, the Prospective Contractor represents and warrants:
 - 1. That the prices in the bid have been arrived at independently, without any collusion with any other competing Prospective Contractor.
 - a. Collusion violates Arkansas Procurement Law and can lead to suspension, debarment, and can be referred to the Attorney General's office for investigation and appropriate legal action (Arkansas Code Annotated § 19-11-240 and 19-11-245).
 - 2. That the Prospective Contractor has not retained a person to solicit or secure the resulting contract upon an agreement or understanding for a commission, percentage, brokerage, or contingent fee, except for retention of bona fide employees or bona fide established commercial selling agencies maintained by the Prospective Contractor for the purpose of securing business.
- D. Qualifications, services, and commodities **must** meet or exceed the required Specifications as outlined in the Solicitation.

TECHNOLOGY ACCESS

- A. When procuring a technology product or when soliciting the development of such a product, the State of Arkansas is required to comply with the provisions of Arkansas Code Annotated § 25-26-201 et seq., as amended by Act 308 of 2013, which expresses the policy of the State to provide individuals who are blind or visually impaired with access to information technology purchased in whole or in part with state funds. The Contractor expressly acknowledges and agrees that state funds may not be expended in connection with the purchase of information technology unless that technology meets the statutory Requirements found in 36 C.F.R. § 1194.21, as it existed on January 1, 2019 (software applications and operating ICSs) and 36 C.F.R. § 1194.22, as it existed on January 1, 2019 (web-



based intranet and internet information and applications), in accordance with the State of Arkansas technology policy standards relating to accessibility by persons with visual impairments.

- B. Accordingly, the Contractor expressly represents and warrants to the State of Arkansas through the procurement process by submission of a Voluntary Product Accessibility Template (VPAT) for 36 C.F.R. § 1194.21, as it existed on January 1, 2019 (software applications and operating ICSs) and 36 C.F.R. § 1194.22, that the technology provided to the State for purchase is capable, either by virtue of features included within the technology, or because it is readily adaptable by use with other technology, of:
1. Providing, to the extent required by Arkansas Code Annotated § 25-26-201 et seq., as amended by Act 308 of 2013, equivalent access for effective use by both visual and non-visual means.
 2. Presenting information, including prompts used for interactive communications, in formats intended for non-visual use.
 3. After being made accessible, integrating into networks for obtaining, retrieving, and disseminating information used by individuals who are not blind or visually impaired.
 4. Providing effective, interactive control and use of the technology, including, without limitation, the operating system, software applications, and format of the data presented, is readily achievable by nonvisual means.
 5. Being compatible with information technology used by other individuals with whom the blind or visually impaired individuals interact.
 6. Integrating into networks used to share communications among employees, program participants, and the public.
 7. Providing the capability of equivalent access by nonvisual means to telecommunications or other interconnected network services used by persons who are not blind or visually impaired.
- C. State agencies cannot claim that a product as a whole is not reasonably available because no product in the marketplace meets all the standards. Agencies must evaluate products to determine which product best meets the standards. If an agency purchases a product that does not best meet the standards, the agency must provide written documentation supporting the selection of a different product, including any required reasonable accommodations.
- D. For purposes of this section, the phrase “equivalent access” means a substantially similar ability to communicate with, or make use of, the technology, either directly, by features incorporated within the technology, or by other reasonable means such as assistive devices or services which would constitute reasonable accommodations under the Americans with Disabilities Act or similar state and federal laws. Examples of methods for providing equivalent access include, but are not limited to, keyboard alternatives to mouse commands, other means of navigating graphical displays, and customizable display appearance. As provided in Arkansas Code Annotated § 25-26-201 et seq., as amended by Act 308 of 2013, if equivalent access is not reasonably available, then individuals who are blind or visually impaired **shall** be provided a reasonable accommodation as defined in 42 U.S.C. § 12111(9), as it existed on January 1, 2019.
- E. If the information manipulated or presented by the product is inherently visual in nature, so that its meaning cannot be conveyed non-visually, these specifications do not prohibit the purchase or use of an information technology product that does not meet these standards.



DELIVERY: FOB DESTINATION

Arkansas State University
College of Veterinary Medicine
2713 Pawnee
Jonesboro, AR 72401

- A. The Contractor **shall** take all reasonable measures to ensure that commodities purchased **are** delivered within thirty (30) days of the Department's issuance of the relevant purchase order unless otherwise agreed upon in writing.
 - 1. The Contractor **shall** give the Department immediate notice of any anticipated delays or plant shutdowns that will affect the delivery requirement. **The Contractor** will not be liable for delays in performance or for non-performance due to unforeseen circumstances or causes beyond the Contractor's control.
- B. All deliveries **must** be made during normal University work hours.
- C. The Contractor **shall** pay all transportation and handling charges, unless otherwise agreed upon in writing by the Contractor and Department.
- D. The Contractor **shall** bear responsibility for loss or damage that occurs during shipping, prior to the order being received by the Department.
 - 1. Risk of loss of the order will pass to the Department upon Contractor's delivery of the order conforming to the resulting purchase order.
 - 2. All orders should be properly packaged to prevent damage during shipping.
- E. The University assumes no liability for commodities produced, processed, or shipped in excess of the amount specified on the Department's purchase order.
- F. Unless otherwise agreed upon in writing by the Contractor and Department, payment will be made within thirty (30) days of the date of the Contractor's delivery of product(s) conforming to the resulting contract and receipt of the Contractor's invoice, whichever is later.

INSPECTION AND ACCEPTANCE

- A. The University may inspect any commodities delivered, tendered, or identified to the University as being procured under a resulting contract to determine whether they conform to the contract.
 - 1. The University's right to inspection may be exercised at any reasonable place and time and in any reasonable manner, as determined in the University's reasonable discretion, before acceptance of and payment for any commodities procured under a resulting contract.
 - 2. If the commodities are found to be conforming as a result of inspection, the University will bear the cost of inspection, if any.
 - 3. If any of the commodities are found to be non-conforming, the University:
 - a. May elect to recover expenses of inspection, if any, from the Contractor, and the Contractor **shall** bear the cost
 - b. The Contractor **shall** be responsible for the cost of any retrieval, return, or disposal of the commodities. Payment for commodities does not constitute acceptance of the commodities as conforming to the contract if the University has not had a reasonable opportunity to inspect the commodities or in the event of Contractor's fraud or concealment of defects.



- B. The University has the option to return any product(s) within the thirty (30) day timeframe for any reason.
- C. The Contractor **shall** include a total satisfaction return policy for all products and **shall not** impose any liability on the University for such returns.

PROPRIETARY INFORMATION

- A. The release of public records is governed by the Arkansas Freedom of Information Act (Arkansas Code Annotated § 25-19-101 et. seq.).
- B. Submission documents about the Solicitation become the property of the University and may be subject to the Arkansas Freedom of Information Act (FOIA).
- C. In accordance with FOIA, and to promote maximum competition in the University's competitive sealed bidding, the University may maintain the confidentiality of certain types of information described in FOIA. Such information may include trade secrets and other information exempted from public disclosure pursuant to FOIA.
- D. Under no circumstances will pricing information submitted in response to an invitation for sealed bids be designated as confidential after the sealed bids have been opened.
- E. Consistent with and to the extent permitted under FOIA, any Prospective Contractor may designate appropriate portions of a bid as confidential by submitting a redacted copy of the bid. By so redacting any information contained in the bid, the Prospective Contractor warrants that, after having received such necessary or proper review by counsel or other knowledgeable advisors, it has formed a good faith opinion that the portions redacted are not considered public records under FOIA.
- F. If a Prospective Contractor deems part of the information contained in a response not to be a public record, the Prospective Contractor should submit one (1) complete copy of the submission documents from which any proprietary or confidential information has been redacted in their bid response. Except for the redacted information, the redacted copy **must** be identical to the original copy, reflecting the same pagination as the original and showing the space from which information was redacted.
- G. The Prospective Contractor is responsible for identifying all proprietary information and for ensuring the electronic copy is protected against restoration of redacted data.
- H. The redacted copy will be open to public inspection under the FOIA without further notice to the Prospective Contractor. If the University deems redacted information to be subject to a public record request under FOIA, the University will endeavor to notify the Prospective Contractor before release of the redacted record.
- I. The University has no liability to a Prospective Contractor with respect to the disclosure of Prospective Contractor's confidential or proprietary information ordered by a court of competent jurisdiction pursuant to FOIA or other applicable law.



OFFICIAL BID PRICE SHEET *See attachment for Specific Model Features

All charges **should** be included on the Official Bid Price Sheet(s), which includes all associated costs (including but not limited to delivery, freight, etc.) for the goods or services being bid. Do not include sales taxes in unit prices. Bid pricing should be valid for 30 days following bid opening to allow sufficient time to tabulate and evaluate bid responses.

ITEM	QUANTITY/UNIT	DESCRIPTION	UNIT PRICE	EXTENDED AMOUNT
1	2	Hereford Model Dystocia Simulator Brown 1025508 Model Number		
2	2	Hereford Epidural and Venipuncture Tail Brown 1026415 Model Number		
4	2	Equine palpation colic simulator with stand 1025584 Model Number		
5	2	Feline Tech Simulator 1026500 Model Number		
6	2	Canine Basic Life Support Simulator 1025621 Model Number		
7	1	Canine Dental Surgical Package Brown 1025648 Model Number		
8	1	Canine Dental Technician Package Brown 1025652 Model Number		
9	1	Canine Dental Technician Package Black 1026127 Model Number		
10	1	Canine Dental Surgical Package Black 1026125 Model Number		
11	1	Holstein Epidural and Venipuncture Tail with Stand 1025536 Model Number		
12	1	Freight and Shipping		

GRAND TOTAL \$ _____



Specific Model Features
Items:

Specific Item	Model Number	Number of items	Specifications
Hereford Model Dystocia Simulator Brown	1025508	2	Specific Model Features Modeled as a True Type Canadian Hereford. Steel reinforced epoxy/fiberglass construction, with water resistant components throughout for ease of cleaning. Recycled plastic base. 1.57m at the shoulder and over 2.80 m from nose to tail, 1 m at widest point. Matching Hereford Calf included Inflatable calf air bed support system. Clear vinyl uterine bag. Soft, durable perineum panel. Soft removable tail. Functional udder with milk tank; ability to simulate mastitic milk and can be introduced in any quadrant. Replica polyurethane pelvis. Padded fetal extractor, obstetric chain and head snare. Landing mat provided to prevent damage to calf. Dr Franks fetal extractor.
Hereford Epidural and Venipuncture Tail Brown	1026415	2	Specific Model Features Silicone tail. Attaches to current Bovine Dystocia and Bovine Theriogenology Model. Tabletop Stand. Full articulation. Venipuncture and Epidural Functions. VSI Blood. Hide covering. Durable and high-fidelity components. Palpable replica bones. Venipuncture. Epidural. Vacuum draw when epidural is performed. Replaceable Parts: Custom VSI blood. Replacement tubing for Epidural. Replaceable tubing for Venipuncture. Hide covering. Bovine Tail stand.
Equine palpation colic simulator with stand	1025584	2	Specific Model Features Modeled as a standard 15 hand Quarter Horse. Steel reinforced epoxy/fiberglass construction with water resistant components for ease of cleaning. 1.5 m at the shoulder and 2.25 m from nose to tail. Widest point is 0.6 m. 5 section inflatable latex GI Tract. Right and left ventral colon, right and left dorsal colon, and cecum. 3 m section of small intestine with mount



			Spleen and left kidney attached with the renosplenic ligament. Palpable aorta capable of simulating a pulse. Palpable soft uterus with cervix, urethra and broad ligament. 3 sets of interchangeable ovaries; anestrus, estrus, and estrus with follicles. Artificial Insemination. Abdominocentesis function with replaceable pad; fluid reservoir and palpable linea. Comes standard in black. Artificial, removable tail. Soft, durable perineum panel. Replica polyurethane pelvis. Inflatable vinyl rectum. Recycled plastic base.
Feline Tech Simulator	1026500	2	Specific Model Features Realistic full-body feline model crafted from high-quality silicone, replicating the weight and texture of a live feline Realistic feline anatomy designed to mimic natural movement, shape, and feel. Fully X-ray-compatible skeleton with removable radius and caudal vertebrae Pre-fractured bones simulating transverse and oblique fractures for diagnostic training. Removable dentistry module for dental cleanings, probing, and charting. Multiple venipuncture sites in both front and hind limbs for blood-drawing practice. Enables training in restraint, positioning, and wound management, including bandaging. Removable eye for easier cleaning. Durable construction designed for repeatable, hands-on training in classroom and lab environments. Replaceable Parts: Tongue Veins Hide Radius bone Caudal vertebrae bone Radius bone with transverse & oblique fractures Caudal vertebrae bone with transverse fracture Scaling/polishing jaw set Scaling/polishing mandible Scaling/polishing maxilla
Canine Basic Life Support Simulator	1025621	2	Specific Model Features Fully articulated steel skeleton with ribcage, and separated toes Representation of trachea and esophagus which allows for practical intubation training Representation of nasal passage to allow for nasogastric intubation training



			Representation of cephalic vein to practice venipuncture and catheterization in both front limbs Jugular and Saphenous vein Chest compression function with feedback monitor which provides feedback on speed and depth of compressions Representation of ear and simulated debris to practice ear cleaning techniques Ideal for practicing restraint and bandaging techniques Comes with VSI carrying bag Replaceable Parts: Tongue Venipuncture Tubing Laryngopharynx Component Ear Capsule (Left & Right) Compression Monitor Belly Capsule Full body Hide Covering Venipuncture Fluid Bag Spring/Rib/Chest Piece
Canine Dental Surgical Package Brown	1025648	1	Specific Model Features Canine dental model in either brown or black Three replaceable extraction jaw sets Carrying case with custom foam inserts Clamp and arm for securing to table Clear jaw set Replaceable Parts: Tongue Larynx/Pharynx Mandible Maxilla
Canine Dental Technician Package Brown	1025652	1	Specific Model Features Canine dental model in either brown or black. Two replaceable scaling sets. One replaceable x-ray set. Carrying case with custom foam inserts. Clamp and arm for securing to table. Clear jaw set. 30 ml jar of artificial calculus Jaw set consists of one mandible and one maxilla.
Canine Dental Technician Package Black	1026127	1	Specific Model Features Canine dental model in either brown or black. Two replaceable scaling sets. One replaceable x-ray set. Carrying case with custom foam inserts. Clamp and arm for securing to table. Clear jaw set. 30 ml jar of artificial calculus Jaw set consists of one mandible and one maxilla
Canine Dental Surgical Package Black	1026125	1	Specific Model Features Canine dental model in either brown or black Three replaceable extraction jaw sets Carrying case with custom foam inserts



			Clamp and arm for securing to table Clear jaw set Replaceable Parts: Tongue Larynx/Pharynx Mandible Maxilla
Holstein Epidural and Venipuncture Tail with Stand	1025536	1	Specific Model Features Silicone tail Attaches to current Bovine Dystocia and Bovine Theriogenology Model Tabletop Stand Full articulation Venipuncture and Epidural Functions VSI Blood Hide covering Durable and high-fidelity components Palpable replica bones Venipuncture Epidural Vacuum draw when epidural is performed Replaceable Parts: Custom VSI blood Replacement tubing for Epidural Replaceable tubing for Venipuncture Hide covering Bovine Tail stand
FREIGHT			

CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM

Failure to complete all of the following information may result in a delay in obtaining a contract, lease, purchase agreement, or grant award with any Arkansas State Agency.

SUBCONTRACTOR:

SUBCONTRACTOR NAME:

☐ Yes ☐ No

IS THIS FOR:

TAXPAYER ID NAME:

☐ Goods?

☐ Services? ☐ Both?

YOUR LAST NAME:

FIRST NAME:

M.I.:

ADDRESS:

CITY:

STATE:

ZIP CODE:

COUNTRY:

AS A CONDITION OF OBTAINING, EXTENDING, AMENDING, OR RENEWING A CONTRACT, LEASE, PURCHASE AGREEMENT, OR GRANT AWARD WITH ANY ARKANSAS STATE AGENCY, THE FOLLOWING INFORMATION MUST BE DISCLOSED:

F O R I N D I V I D U A L S *

Indicate below if: you, your spouse or the brother, sister, parent, or child of you or your spouse is a current or former: member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee:

Position Held	Mark (√)		Name of Position of Job Held [senator, representative, name of board/ commission, data entry, etc.]	For How Long?		What is the person(s) name and how are they related to you? [i.e., Jane Q. Public, spouse, John Q. Public, Jr., child, etc.]	
	Current	Former		From MM/YY	To MM/YY	Person's Name(s)	Relation
General Assembly							
Constitutional Officer							
State Board or Commission Member							
State Employee							

☐ None of the above applies

F O R A N E N T I T Y (B U S I N E S S) *

Indicate below if any of the following persons, current or former, hold any position of control or hold any ownership interest of 10% or greater in the entity: member of the General Assembly, Constitutional Officer, State Board or Commission Member, State Employee, or the spouse, brother, sister, parent, or child of a member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee. Position of control means the power to direct the purchasing policies or influence the management of the entity.

Position Held	Mark (√)		Name of Position of Job Held [senator, representative, name of board/commission, data entry, etc.]	For How Long?		What is the person(s) name and what is his/her % of ownership interest and/or what is his/her position of control?	
	Current	Former		From MM/YY	To MM/YY	Person's Name(s)	Ownership Interest (%) Position of Control
General Assembly							
Constitutional Officer							
State Board or Commission Member							
State Employee							

☐ None of the above applies

Contract and Grant Disclosure and Certification Form

Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this contract. Any contractor, whether an individual or entity, who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the agency.

As an additional condition of obtaining, extending, amending, or renewing a contract with a state agency I agree as follows:

1. Prior to entering into any agreement with any subcontractor, prior or subsequent to the contract date, I will require the subcontractor to complete a **CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM**. Subcontractor shall mean any person or entity with whom I enter an agreement whereby I assign or otherwise delegate to the person or entity, for consideration, all, or any part, of the performance required of me under the terms of my contract with the state agency.

2. I will include the following language as a part of any agreement with a subcontractor:

Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this subcontract. The party who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the contractor.

3. No later than ten (10) days after entering into any agreement with a subcontractor, whether prior or subsequent to the contract date, I will mail a copy of the **CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM** completed by the subcontractor and a statement containing the dollar amount of the subcontract to the state agency.

I certify under penalty of perjury, to the best of my knowledge and belief, all of the above information is true and correct and that I agree to the subcontractor disclosure conditions stated herein.

Signature _____ Title _____ Date _____

Vendor Contact Person _____ Title _____ Phone No. _____

Agency use only

Agency Number _____ Agency Name _____ Agency Contact Person _____ Contact Phone No. _____ Contract or Grant No. _____

Vendor Name: _____

COMBINED CERTIFICATIONS FOR CONTRACTING WITH THE STATE OF ARKANSAS

Pursuant to Arkansas law, a vendor must certify as specified below and as designated by the applicable laws.

1. **Israel Boycott Restriction:** A public entity shall not contract with a person or company (the "Contractor") unless the Contractor certifies in writing that the Contractor is not currently engaged in a boycott of Israel. If at any time after signing this certification the Contractor decides to boycott Israel, the Contractor must notify the contracting public entity in writing. See Arkansas Code Annotated § 25-1-503.
2. **Illegal Immigrant Restriction:** For contracts valued at \$25,000 or greater. No state agency may contract for services with a Contractor who knowingly employs or contracts with an illegal immigrant. The Contractor shall certify that it does not knowingly employ, or contract with, illegal immigrants. See Arkansas Code Annotated § 19-60-105.
3. **Energy, Fossil Fuel, Firearms, and Ammunition Industries Boycott Restriction:** For contracts valued at \$75,000 or greater. A public entity shall not contract unless the contract includes a written certification that the Contractor is not currently engaged in and agrees not to engage in, a boycott of an Energy, Fossil Fuel, Firearms, or Ammunition Industry for the duration of the contract. See Arkansas Code Annotated § 25-1-1102.
4. **Scrutinized Company Restriction:** Required with bid or proposal submission. A state agency shall not contract with a Scrutinized Company or a company that employs a Scrutinized Company as a subcontractor. A Scrutinized Company is a company owned in whole or with a majority ownership by the government of the People's Republic of China. A state agency shall require a company that submits a bid or proposal for a contract to certify that it is not a Scrutinized Company and does not employ a Scrutinized Company as a subcontractor. See Arkansas Code Annotated § 25-1-1203.

By signing this form, the Contractor agrees and certifies they are in compliance with the certification requirements listed above that are relevant to the contractor's performance under the resulting contract and will remain so for the aggregate term of any resultant contract. Additionally, the Contractor agrees and certifies they shall comply with all Arkansas laws applicable to the contractor's performance under the resulting contract.

Vendor Signature

Date

**Request for Taxpayer
Identification Number and Certification**

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
requester. Do not
send to the IRS.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)	
	2 Business name/disregarded entity name, if different from above.	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. ☐ Individual/sole proprietor ☐ C corporation ☐ S corporation ☐ Partnership ☐ Trust/estate ☐ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. ☐ Other (see instructions)	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions ☐	
	5 Address (number, street, and apt. or suite no.). See instructions.	Requester's name and address (optional)
6 City, state, and ZIP code		
7 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 generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number	
or	
Employer identification number	

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); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

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, item 2 does not apply. For 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 for Part II, later.

Sign Here	Signature of U.S. person	Date
------------------	---------------------------------	-------------

General Instructions

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

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

Vendor Information Request Form

The information requested is necessary not only to maintain an accurate vendor file, but also to comply with the Internal Revenue Service Regulations. Federal law stipulates that each payee furnish an accurate Federal Tax Identification Number to the payer.

Please complete the appropriate fields below:

Business/Individual Name: _____

Contact Name: First: _____ Middle: _____ Last: _____

Phone Number: _____

Email Address: _____

Select the appropriate category for tax purposes:

- ☐ US Citizen
☐ Legal Permanent
☐ Resident (Green Card)
☐ Nonresident Alien
☐ US Entity
☐ Foreign Entity

Order Address:

Address: _____ County: _____
City: _____ State: _____ Zip Code: _____
Nation: _____

Payment Address:

Address: _____ County: _____
City: _____ State: _____ Zip Code: _____
Nation: _____

Important: In order to expedite any current or future order, please email the required forms to procurement@astate.edu.

W-9 (US Citizen, LPR)

W-8BEN (Foreign Individuals)

W-8BENE (Foreign Entities)

Procurement Services
PO Box 1860
State University, AR 72467
(870) 972-2028
procurement@astate.edu