

**CITY OF CHICAGO
DEPARTMENT OF PROCUREMENT SERVICES
ROOM 403, CITY HALL, 121 N. LASALLE STREET**

RECEIVED
DEC 14 2012
Judy Alvario

FOR NCRB USE ONLY	
Date	<u>1-8-13</u>
Recommend Approval	<input type="checkbox"/>
Return To Dept.	<input type="checkbox"/>
Reject	<input type="checkbox"/>
Vote	<u>1/1/1</u>

**NON-COMPETITIVE REVIEW BOARD (NCRB)
JUSTIFICATION FOR NON-COMPETITIVE PROCUREMENT**

COMPLETE THIS SECTION IF NEW CONTRACT

For contract(s) in this request, fill in each of the four (4) major subject areas below in accordance with the **Instructions for Preparation of Non-Competitive Procurement Form** on the reverse side. Complete "Other" subject area if additional information is needed. Subject areas must be fully completed. Responses merely referencing attachments will not be accepted.

Request that negotiations be conducted only with AskReply, Inc. dba B2GNow for the product(s) and/or service(s) described herein.

This is a request for:

One-Time Contractor Requisition #: , copy attached or Term Agreement or Delegate Agency (Check one).

If Delegate Agency, this request is for "blanket approval" for all contracts within the <<proj description/name>> (Attach List).

Pre-Assigned Specification No.:

Pre-Assigned Contract No.:

COMPLETE THIS SECTION IF AMENDMENT OR MODIFICATION TO CONTRACT

Describe in detail the change in terms of dollars, time period, scope of services, etc., its relationship to the original contract and the specific reasons for the change. Indicate both the original and the adjusted contract amount and/or expiration date with this change, as applicable. Attach copy of all supporting documents. Request approval for a contract amendment or modification to the following:

Contract #: 18455

Company or Agency Name:

Specification #: 68442

Contract or Program Description:

Modification #: Req # 77477

(Attach List, if multiple)

KimLeMay Woodfork-Moore

312-744-8705

[Signature]

DPS

12/13/2012

Originator Name
(mm/dd/yr)

Telephone

Signature

Department

Date

<input checked="" type="checkbox"/> PROCUREMENT HISTORY Enhancements/Upgrades are required as program changes are identified. B2GNow retains ownership of the code therefore is the only option for updates
<input checked="" type="checkbox"/> ESTIMATED COST \$500,000 <u>\$1,000,000</u> <i>[Signature]</i>
<input checked="" type="checkbox"/> SCHEDULE REQUIREMENTS See attached
<input checked="" type="checkbox"/> EXCLUSIVE OR UNIQUE CAPABILITY See attached
<input checked="" type="checkbox"/> OTHER See attached

APPROVED BY: *[Signature]*

DEPARTMENT HEAD OR DESIGNEE

DATE

BOARD CHAIRPERSON

DATE

PRINT NAME

PRINT NAME

CHIEF PROCUREMENT OFFICER

DATE OF APPROVAL

INSTRUCTIONS FOR PREPARATION OF NON-COMPETITIVE PROCUREMENT FORM

If a City Department has determined that the purchase of supplies, equipment, work and/or services cannot be done on a competitive basis, a justification must be prepared on this "Justification for Non-Competitive Procurement Form" in which procurement is requested on a non-bid or non-competitive basis in accordance with 65 ILCS 5/8-10-4 of the Illinois Compiled Statutes. All applicable questions in each Subject Area below must be answered. The information provided must be complete and in sufficient detail to allow for a decision to be made by the Non-Competitive Procurement Review Board. Also attach a DPS Checklist and any other required documentation. The Board will not consider justification with incomplete information documentation or omissions.

PROCUREMENT HISTORY

1. Describe the requirement and how it evolved from initial planning to its present status.
2. Is this a first time requirement or a continuation of previous procurement from the same source? If so, explain the procurement history.
3. Explain attempts made to competitively bid the requirement. (Attach copy of notices and list of sources contacted)
4. Describe all research done to find other sources. (List other cities contacted, companies in the industry contacted, professional organizations, periodicals and other publications used).
5. Explain future procurement objectives. Is this a one-time request or will future requests be made for doing business with the same source?
6. Explain whether or not future competitive bidding is possible. If not, why not?

ESTIMATED COST

1. What is the estimated cost for this requirement (or for each contract, if multiple awards contemplated)? What is the funding source?
2. What is the estimated cost by fiscal year, if the job project or program covers multiple years?
3. Explain the basis for estimating the cost and what assumptions were made and/or data used (i.e., budgeted amount, previous contract price, current catalog or cost proposal from firms solicited, engineering or in-house estimate, etc.)
4. Explain whether the proposed Contractor or the City has a substantial dollar investment in original design, tooling or other factors which would be duplicated at City expense if another source was considered. Describe cost savings or other measurable benefits to the City which may be achieved.
5. Explain what negotiation of price has occurred or will occur. Detail why the estimated cost is deemed reasonable.

SCHEDULE REQUIREMENTS

1. Explain how the schedule was developed and at what point the specific dates were known.
2. Is lack of drawings and/or specifications a constraining factor to competitive bidding? If so, why is the proposed Contractor the only person or firm able to perform under these circumstances? Why are the drawings and specifications lacking? What is the lead time required to get drawings and specifications suitable for competition? If lack of drawings and specifications is not a constraining factor to competitive bidding, explain why only one person or firm can meet the required schedule.
3. Outline the required schedule by delivery or completion dates and explain the reasons why the schedule is critical.
4. Describe in detail what impact delays for competitive bidding would have on City operations, programs, costs and budgeted funds.

EXCLUSIVE OR UNIQUE CAPABILITY

1. If contemplating hiring a person or firm as a Professional Service Consultant, explain in detail what professional skills, expertise, qualifications, and/or other factors make this person or firm exclusively or uniquely qualified for the project. Attach a copy of the cost proposal, scope of services, and temporary consulting services form.
2. Does the proposed firm have personnel considered unquestionably predominant in the particular field?
3. What prior experience of a highly specialized nature does the person or firm exclusively possess that is vital to the job, project or program?
4. What technical facilities or test equipment does the person or firm exclusively possess of a highly specialized nature which is vital to the job?
5. What other capabilities and/or capacity does the proposed firm possess which is necessary for the specific job, project or program which makes them the only source who can perform the work within the required time schedule without unreasonable costs to the City?
6. If procuring products or equipment, describe the intended use and explain any exclusive or unique capabilities, features and/or functions the items have which no other brands or models, etc. possess. Is compatibility with existing equipment critical from an operational standpoint? Explain why?
7. Is competition precluded because of the existence of patent rights, copyrights, trade secrets, technical data, or other proprietary data? Attach documentation verifying such.
8. If procuring replacement parts and/or maintenance services, explain whether or not replacement parts and/or services can be obtained from any other sources? If not, is the proposed firm the only authorized or exclusive dealer/distributor and/or service center? If so, attach letter from manufacturer.

MBE/WBE COMPLIANCE PLAN

- * All submissions must contain detailed information about how the proposed firm will comply with the requirements of the City's Minority and Women Owned Business program. All submissions must include a complete C-1 and D-1 form, which is available on the Procurement Services page on the City's intranet site. The City Department must submit a Compliance Plan, including details about direct and indirect compliance.

OTHER

Explain other related considerations and attach all applicable supporting documents, i.e., an approved ITGB form.

REVIEW AND APPROVAL

This form must be signed by both Originator of the request and signed by the Department Head or authorized designee. After review and final disposition from the Board, this form will be signed by the Chairperson of the Board. After review and final disposition from the Board, this form will be signed by the Chief Procurement Officer for final approval.

Compliance and Certification (C2) Upgrades/Enhancements

Justification for Non Competitive Procurement

Procurement History

- 1. Describe the requirement and how it evolved from initial planning to its present status.**

The Department of Procurement Services identified a need for an application to manage the Department's Certification and Compliance data. A Request for Services ("RFS") was issued under the City's Master Consulting Agreements for IT Management. After careful review and evaluation of the proposals, a task order was issued to the selected vendor, Los Alamos Technical Associates, Inc. ("LATA").

LATA's proposal included a hosted solution performed by their subcontractor, ASKREPLY, Inc. d/b/a B2GNow, the company that owns the proprietary code that is being used for the C2 program. LATA's proposed solution, including B2GNow, was evaluated as part of a competitive evaluation process and selected as best qualified to meet the City's requirement. The City's approved task order agreement with LATA contained a provision that annual hosted service will be contracted directly between the City and B2GNow.

B2GNow retains ownership of the code and will continue to host the program. DPS is working with B2GNow to enhance their standard code to meet our requirements. In addition, B2GNow has existing contracts with numerous other government and private entities, and any benefits given to these other entities in the future will also be made available to the City.

- 2. Is this a first time requirement or a continuation of previous procurement from the same source?**

This is a continuation of a previous procurement from the same source.

- 3. Explain attempts made to competitively bid the requirement.**


Through a competitive evaluation process, the City selected B2GNow as part of the winning proposal submitted by LATA as best qualified to meet the City's requirement. The City's agreement with LATA (including the services provided by B2GNow as LATA's subcontractor) has expired and the City has a direct contract agreement with B2GNow for the hosted solution. This requirement is not suitable for competitive bidding because of the proprietary nature of the service and the necessity for ongoing hosting by B2GNow.

- 4. Describe all research done to find other sources.**

Because this is a proprietary code and hosting agreement, research does not apply.

5. **Explain future procurement objectives. Is this a one-time request or will future requests be made for doing business with the same source?**
This request is for an amendment to the existing hosting and support contract. As enhancements are identified future requests may be made for doing business with the same source due to the proprietary nature of the program code.
6. **Explain whether or not future competitive bidding is possible. If not, why not?**
Future competitive bidding is not possible for this particular requirement unless the proprietary nature of the code were to change in the future.

Estimated Cost

1. **What is the estimated cost for this requirement? What is the funding source?**
The cost of the upgrades/enhancements is approximately ~~\$500,000 (DUR).~~ ^{\$1,000,000} 
2. **What is the estimated cost by fiscal year, if the job project or program covers multiple years?**
Depends upon requirements
3. **Explain the basis for estimating the cost and what assumptions were made and/or data used (i.e. budgeted amount, previous contract price, current catalog or cost proposal from firms solicited, engineering or in-house estimate, etc.).**
The cost is purely an estimate as a comprehensive list of enhancements/upgrades has not yet been identified. This request is to have the agreement amended to add language to the contract to allow enhancements to be treated as task order projects, to be estimated and encumbered once requirements for the enhancement/upgrade are specified.
4. **Explain whether the proposed Contractor or the City has a substantial dollar investment in original design, tooling or other factors which would be duplicated at City expense if another source was considered. Describe cost savings or other measurable benefits to the City which may be achieved.**
B2GNow is the owner of this proprietary code, and the sole source for procuring it. Other proposals were considered during the competitive evaluation process and found to be less qualified. Requirements gathering and specification for this report are nearly identical to a completed custom awards report, including specified sorting and grouping which will minimize the development time for the custom payments report.
5. **Explain what negotiation of price has occurred or will occur. Detail why the estimated cost is deemed reasonable.**
N/A

Schedule Requirements

- 1. Explain how the schedule was developed and at what point the specific dates were known.**
TBD.
- 2. Is lack of drawings and/or specifications a constraining factor to competitive bidding? If so, why is the proposed Contractor the only person or firm able to perform under these circumstances? Why are the drawings and specifications lacking? What is the lead time required to get drawings and specifications suitable for competition? If lack of drawings and specifications is not a constraining factor to competitive bidding explain why only one person or firm can meet the required schedule.**

N/A

- 3. Outline the required schedule by delivery or completion dates and explain the reasons why the schedule is critical.**
TBD.
- 4. Describe in detail what impact delays for competitive bidding would have on City operations, programs, costs and budgeted funds.**
This program was selected through a competitive evaluation process. Competitive bidding was not possible because the solution was unknown to the City at the time the RFS was issued. The proposed solutions were evaluated competitively and this solution was selected as the most advantageous to the City. Any modifications to the proprietary code must be performed by B2GNow.

Exclusive or Unique Capability

- 1. If contemplating hiring a person or firm as a Professional Service other factors make this person or firm exclusive or uniquely qualified for the project. Attach a copy of cost proposal and scope of services.**
Please see the attached proposal from B2GNow.
- 2. Does the proposed firm have personnel considered unquestionably predominant in the particular field?**
Yes.
- 3. What prior experience of a highly specialized nature does the person or firm exclusively possess that is vital to the job, project or program?**
B2GNow is the owner of the proprietary code which is integral to the program selected by the City through a competitive evaluation process to best meet the needs of the requirement.
- 4. What technical facilities or test equipment does the person or firm exclusively possess of a highly specialized nature which is vital to the job?**
The competitively selected program is hosted remotely by B2GNow through their facility in Phoenix.

5. **What other capabilities and/or capacity does the proposed firm possess which is necessary for the specific job, project or program which makes them the only source who can perform the work within the required time schedule without unreasonable costs to the City?**

B2GNow is the owner of the code and no other vendor has access to this code.

6. **If procuring products or equipment, describe the intended use and explain any exclusive or unique capabilities, features and/or functions the items have which no other brands or models, etc. possess. Is compatibility with existing equipment critical from an operational standpoint? Explain why.**

This program was compared with all other proposals received and after careful evaluation, selected as best meeting the needs of the City for this requirement.

7. **Is competition precluded because of the existence of patent rights, copyrights, trade secrets, technical data, or other proprietary data? Attach documentation verifying such.**

Please see attached documentation.

8. **If procuring replacement parts and/or maintenance services, explain whether or not replacement parts and/or services can be obtained from any other sources? If not, is the proposed firm the only authorized or exclusive dealer/distributor and/or service center? If so, attach letter from manufacturer.**

N/A

MBE/WBE Compliance Plan

1. **All submissions must contain detailed information about how the proposed firm will comply with the requirements of the City's Minority and Women Owned Business program. All submissions must include a complete C-1 and D-1 form, which is available on the Procurement Services page on the City's intranet site.**

This is a No Stated Goals amendment.

Other

1. **Explain other related considerations and attach all applicable supporting documents (an approved Information Technology Strategy Committee (ITSC) form, an approved Request for Individual Contract Services form, etc.) N/A**

SCOPE OF SERVICES

1.1 Definitions

“Task Order” means an approved Proposal, as modified by negotiation between the City and Contractor, signed by the CPO and CIO and issued pursuant to the Task Order procedures set forth in this agreement.

“Task Order Request” means a written request from the CIO and CPO for Contractor to prepare and submit a Proposal, including Cost Proposal for Services relating to a specific project, issued pursuant to the Task Order procedures set forth in this agreement.

Description of Services

1. General. This description of Services is intended to be general in nature and is neither a complete description of Contractor's Services nor a limitation on the Services that Contractor is to provide under this Agreement. Contractor must provide the Services in accordance with the standards of performance set forth in Section 2.3. The Services that Contractor must provide, generally, are described in Exhibit 1, Statement of Work, Exhibit 1A, and Exhibit 9, RFP Response.

Task Order Services.

1. Task Order Requests. From time to time the CIO and the CPO may issue Task Order Requests which are within the scope of this Agreement. Task Order Requests, if any, will set forth the project for which Services are to be performed, the required completion date, and the basis of compensation. In the event that a project is funded in whole or part with state or federal funds, the Task Order Request may also set forth additional conditions required by the particular source of funds and such additional conditions will become part of this Agreement with respect to that specific project. By accepting a Proposal in response to a particular Task Order Request, this Agreement will be deemed to have been amended to include such special conditions pursuant to Section 10.03 but with respect to that project only. The Contractor will not respond to Task Order Requests which are not within the scope of this Agreement.

2. Proposals.

(A) The Contractor will respond to a Task Order Request by submitting a Proposal to the CIO that demonstrates how the Contractor will achieve the requested results and contains a time schedule for delivery of the results, any Deliverables to be provided and a schedule for delivery, and a Cost Proposal, all of which conform to the terms of the Task Order Request and the terms and conditions of this Agreement. Proposals will constitute irrevocable offers for a period of 60 calendar days after receipt by the City. Any and all costs associated with the preparation of a Proposal will not be a reimbursable cost under this Agreement.

(B) Proposals satisfactory to the CIO must be accepted on behalf of the City by the CPO before binding the City and Contractor. The City's acceptance will be demonstrated by a Notice-

to-Proceed and a Task Order, issued pursuant to the Task Order procedures set forth in this Section 3.01(c). The Contractor will not commence Services, and the City will not be liable for any costs incurred by or payments to the Contractor, without a Notice-to-Proceed so executed. All approved' Proposals will be governed by the terms and conditions of the Project Documents. The Project Documents will be interpreted in the following order of precedence: the terms of this Agreement, Task Order Request, and Task Order (approved Proposal). Notwithstanding anything to the contrary contained in this Agreement, if any Task Order contains terms that are inconsistent or conflict with this Agreement, or shift the risk allocation contemplated in this Agreement, such Task Order must be treated as an amendment pursuant to Section 10.03. Further, it is contemplated that each Task Order will include scopes of services setting forth the obligations of the Contractor under that Task Order, but the parties recognize that, depending upon the nature of the scope of services, the terms and conditions in this Agreement may not be appropriate for the undertaking contemplated by the Task Order. Therefore, any project for which the terms of this Agreement are deficient as a business and/or legal matter, such as, without limitation, deficient risk allocation provisions or licensing provisions given the nature of the project, must be done by amendment pursuant to Section 10.03.

(C) The Contractor acknowledges and agrees that this Agreement and any Task Order may be subject to approval by other governmental agencies and that, if such approval is required, the Contractor will perform no Services relating to a Proposal until such approval is obtained.

3. Deadlines for Submittal of Proposals. Proposals will be submitted to the CIO no later than the date set forth in the Task Order Request and if no date is specified then no later than 15 business days following Contractor's receipt of the Task Order Request. Failure to provide a Proposal on a timely basis may result in rejection of the Proposal.

4. Negotiation Possible. The City reserves the right, at its option, either to accept a Proposal as submitted by the Contractor, reject the Proposal, or to negotiate a more satisfactory Proposal with the Contractor.

5. Project Documents Order of Precedence. In the event of any conflicts between the terms of a Task Order and the terms of this Agreement, pursuant to Chicago Municipal Code Section 2-92-345, the terms of the Task Order will only supersede the terms of this Agreement if the circumstances required to amend the Agreement have been satisfied as set forth in Section 10.3.

Deliverables

In carrying out its Services, Contractor must prepare or provide to the City various Deliverables. "Deliverables" include , but are not limited to, all finished and unfinished originals or copies of documents, screens, reports, writings, procedural manuals, forms, source and object code, work flow charts, methods, processes, data studies, plans, designs, transformed data, briefs, drawings, maps, models, photographs, files, records, computer printouts, estimates, memoranda, interfaces, computation, papers, supplies, notes, recordings, videotapes, pictorial reproductions, designs or graphic representations, equipment descriptions, and other materials prepared by the

Contractor under this Agreement.

Contractor represents and warrants that the Deliverables when submitted to the City for acceptance and for the duration of the warranty period will conform to the acceptance criteria, the specifications, the Statement of Work, and documentation prepared by Contractor or on behalf of Contractor in connection with performance of the Services and will be free of errors in design, material and workmanship. The warranty contained in this section will continue for a period of one year ("Warranty Period") after acceptance (unless otherwise specified in this section or the Statement of Work). If the City notifies the Contractor, or the Contractor becomes aware, of any non-performance, error or defect covered by the forgoing warranty within the Warranty Period, the Contractor shall, at its expense, promptly correct such nonperformance, error or defect, but in no event later than 30 days after notification by the City. Any repair or replacement of Deliverables or portions thereof will be additionally and automatically warranted as set forth herein. Such warranty will survive inspection, acceptance and payment.

Partial or incomplete Deliverables may be accepted for review only when required for a specific and well-defined purpose for the benefit of the City and when consented to in advance by the City. Such Deliverables will not be considered as satisfying the requirements of this Agreement and partial or incomplete Deliverables in no way relieve Contractor of its obligations under this Agreement.



KIMLEMY WOODFORK-MOORE



DEPARTMENT OF PROCUREMENT SERVICES
CITY OF CHICAGO

DATE: December 13, 2012

TO: Jamie L. Rhee
Chief Procurement Officer

FROM: KimLeMay Woodfork-Moore 
Assistant Procurement Officer

SUBJECT: **REQUEST FOR VENDOR LIMIT INCREASE & SCOPE MODIFICATION
CURRENT PO NUMBER: 18455
CURRENT SPECIFICATION NUMBER: 68442
CURRENT & FUTURE ENHANCEMENTS FOR C2
VENDOR: ASKREPLY, INC. (DBA/B2GNOW)**

The Department of Procurement Services (DPS) requests permission to initiate an amendment to the existing maintenance and support agreement (PO # 18455) with B2GNow, the contractor for our hosted Certification and Compliance (C2) system. Utilization of Minority-Owned, Women-Owned and Disadvantaged-Owned Business Enterprises (MWDBE) is a critical part of the City of Chicago Procurement process. The certification and awarding of contracts to MWDBE firms as primes and/or subcontractors is managed, tracked and reported via the C2 system. The City of Chicago is constantly working to improve the MWDBE program and its reporting capabilities. DPS would like to modify the existing C2 contract to include general language that would allow the City to issue "task orders" as MWDBE program enhancements are identified and required. B2GNow retains ownership of the code and will continue to host the program. DPS is working with B2GNow to enhance their standard code to meet our requirements. We are requesting a vendor limit increase and scope modification in order to address currently identified and future enhancements to the C2 program as needed.

Attached is the NCRB Justification Form; scope of services; DPS Checklist and all relevant forms and supporting documentation required for a Non Competitive Procurement modification. If you concur with this request, please sign this memo and return the entire package to KimLeMay Woodfork-Moore to continue processing.

ASKREPLY, INC. (DBA/B2GNOW)
Page 2

Procurement Type: **Amendment to Non-Competitive Procurement**

Duration: **N/A**

Estimated Cost: **\$ ~~500,000.00~~ \$1,000,000** 

Funding: **013-0B24-35-2005-0149-220149**

User Contact: **KimLeMay Woodfork-Moore 312-744-8705**
Deputy Contact: **Monica Jimenez 312-744-0845**



Jamie L. Rhee, Chief Procurement Officer
Approval to Proceed with Amendment

DPS PROJECT CHECKLIST

For DPS Use Only

Date Received

Date Returned

Date Accepted

CA/CN's Name

IMPORTANT: ALL INFORMATION SHOULD BE COMPLETED, ATTACH ALL REQUIRED MATERIALS AND SUBMIT FOR ROUTING TO THE DEPARTMENT OF PROCUREMENT SERVICES, ROOM 403, CITY HALL, 121 N. LASALLE STREET, CHICAGO, ILLINOIS 60602, ATTENTION: CHIEF PROCUREMENT OFFICER.

General Information:

Date: 12/13/2012	Need by (estimated date): 12/14/2013	
Requisition No.: 77477	Contact Person:	Project Manager:
Specification No.: (if known) 68442	KimLemay Woodfork-Moore	KimLemay Woodfork-Moore
PO No.: (if known) 18455	Telephone: 3127448705	Telephone: 3127448705
Modification No.: (if known)	Fax: -3127440010	Fax: 3127440010
Previous PO No.: (if known)	Email: kwoodforkmoore@cityofchicago.org	Email: kwoodforkmoore@cityofchicago.org

Project Description: Amendment to PO # 18455 for Vendor Limit Increase and Scope Change for Upgrades and Enhancements to be identified in hosted Certification & Compliance (C2) system

Funding:

City:	<input type="checkbox"/> Corporate	<input type="checkbox"/> Bond	<input type="checkbox"/> Enterprise	<input type="checkbox"/> Grant*	<input type="checkbox"/> Other:
State:	<input type="checkbox"/> IDOT/Transit	<input type="checkbox"/> IDOT/Highway	<input type="checkbox"/> Grant*	<input type="checkbox"/> Other:	
Federal:	<input type="checkbox"/> FHWA	<input type="checkbox"/> FTA	<input type="checkbox"/> FAA	<input type="checkbox"/> Grant*	<input type="checkbox"/> Other:

LINE	FY	FUND	DEPT	ORGN	APPR	ACTV	PROJECT	RPTG	\$ DOLLAR AMOUNT
	013	0B24	35	0149	220149				\$500,000 \$1,000,000

Term Estimated Value \$500000

*IF GRANT FUNDED, ATTACH COPY OF THE APPROVED GRANT AND APPLICATION AND ANY OTHER TERMS AND CONDITIONS OF FUNDING SOURCE THAT MAY APPLY. GRANT FUNDS MUST BE COMMITTED OR SPENT BY DEADLINE: (DATE)

Scope Statement:

Attached is a Detailed Scope of Services and/or Specification. E-mail softcopy in Microsoft Word to DPS Unit Manager

IMPORTANT:

THIS IS A CRITICAL PORTION OF YOUR SUBMITTAL. IN ORDER FOR DPS TO ACCEPT YOUR SUBMITTAL YOU MUST COMPLETE THE SPECIFIC SCOPE REQUIREMENTS AS SET FORTH IN THE SUPPLEMENTAL CHECKLIST FOR THAT UNIT.

Purchase Order Type (Check All That Apply):

New Request	Modification/Amendment
<input type="checkbox"/> Blanket/Term/DUR/Agreement	<input type="checkbox"/> Time Extension**
<input type="checkbox"/> Master Agreement (Task Order)	<input checked="" type="checkbox"/> Vendor Limit Increase
<input type="checkbox"/> Standard/One-Time Purchase	<input checked="" type="checkbox"/> Scope Change/Price Increase/Additional Line Item(s)
Forms	<input type="checkbox"/> Other (specify):
<input type="checkbox"/> Requisition	
<input type="checkbox"/> Special Approvals	
<input checked="" type="checkbox"/> Non-Competitive Review Board (NCRB)	

Contract Term: 5 years

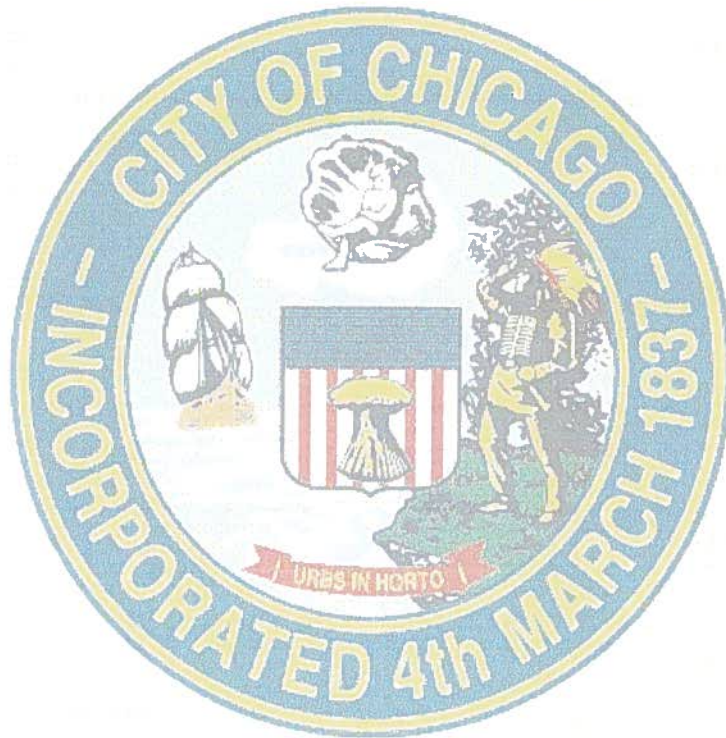
** Requested Term (Number of Months):

Pre-Bid/Submittal Requirements:

Mandatory Pre Bid/Submittal Conference? Yes* No

Requesting Site Visit? Yes No

*If yes, explain reasons why mandatory attendance is necessary.



DPS PROJECT CHECKLIST

The following is a general description of what should be included in a Scope of Services or Specification:

A clear description of all anticipated services and products, including: time frame for completion, special qualifications of prospective vendors, special requirements or needs of the project, locations, anticipated participating user departments, citation of any applicable City ordinance or state/federal regulation or statute.

ARCHITECTURAL/ENGINEERING SUPPLEMENTAL CHECKLIST

Required Attachments: Scope of Services, including location, description of project, services required, deliverables, and other information as required

Risk Management

Current Insurance Requirements prepared/approved by Risk Management:

Yes No

Will services be performed within 50 feet of CTA train or other railroad property?

Yes No

Will services be performed on or near a waterway?

Yes No

If applicable, Pre-Qualification Category No.

Category Description:

For Pre-Qualification Program, attach list of suggested firms to be solicited

Other Agency Concurrence Required: None State Federal Other _____

If Amendment request, please verify and provide the following:

Contractor's Name:

Contractor's Address:

Contractor's e-mail Address:

Contractor's Phone Number:

Contractor's Contact Person:

Attach Recommendation of MBE/WBE/DBE Analysis Form

Yes No

AVIATION CONSTRUCTION SUPPLEMENTAL CHECKLIST

DOA sign-off for final design documents:

Yes No

Required Attachments:

Copy of Draft Contract Documents and Detailed Specifications

Risk Management:

Current Insurance Requirements prepared/approved by Risk Management:

Yes No

Will work be performed within 50 feet of CTA or ATS structure or property?

Yes No

Will work be performed airside?

Yes No

*NOTE: Any non-construction Aviation request, complete the applicable section.

Do bid documents contain Sensitive Security Information (SSI)?

Yes* No Redacted

*If yes, attach Confidentiality Statement

Attach Recommendation of MBE/WBE/DBE Analysis Form

Yes No

If Amendment request, please verify and provide the following:

Contractor's Name:

Contractor's Address:

Contractor's e-mail Address:

Contractor's Phone Number:

Contractor's Contact Person:

COMMODITIES SUPPLEMENTAL CHECKLIST

Required Attachments:

- Detailed Specifications (Scope of Services) including detailed description of the product, delivery location, user department contact, price escalation considerations
- Bidder's qualification, contract term and extension options
- Contractor's qualifications, citation of any applicable City/State/Federal statutes or regulations, citation of any applicable technical standards
- Price Lists/Catalogs, technical drawings and other exhibits and attachments as appropriate.

Attach Recommendation of **MBE/WBE/DBE Analysis Form** Yes No
 Is this a **Revenue Producing contract?** Yes No

If Modification request, please verify and provide the following:

- Contractor's Name:
- Contractor's Address:
- Contractor's e-mail Address:
- Contractor's Phone Number:
- Contractor's Contact Person:

CONSTRUCTION SUPPLEMENTAL CHECKLIST

Required attachments:

Copy of Draft (80% Completion), Contract Documents and Detailed Specifications

Risk Management

- Current Insurance Requirements prepared/approved by Risk Management: Yes No
- Will services be performed within 50 feet of CTA train or other railroad property? Yes No
- Will services be performed on or near a waterway? Yes No

Attach Recommendation of **MBE/WBE/DBE Analysis Form** Yes No

If Modification request, please verify and provide the following:

- Contractor's Name:
- Contractor's Address:
- Contractor's e-mail Address:
- Contractor's Phone Number:
- Contractor's Contact Person:

PROFESSIONAL SERVICES SUPPLEMENTAL CHECKLIST

If New Request (Check applicable boxes):

- Is this a **Request for Information (RFI)**? Yes No
- Is this a **Request for Qualifications (RFQ)**? Yes No
- Is this a **Request for Proposal (RFP)**? Yes No
- If RFQ or RFP, did any outside Consultant provide advice or deliverables in developing the RFQ or RFP? Yes* No

*If yes, Company Name: PO#

Attach a narrative explaining the consulting services and deliverables provided.

Is this a **Non-Competitive Procurement?** Yes* No

*If yes, attach completed Non-Competitive Justification form, vendor proposal and completed MBE/WBE compliance plan (Schedules C-1 and D-1) submitted to the Non-Competitive Review Board.

Is this a request for **Individual Contract Services?** Yes* No

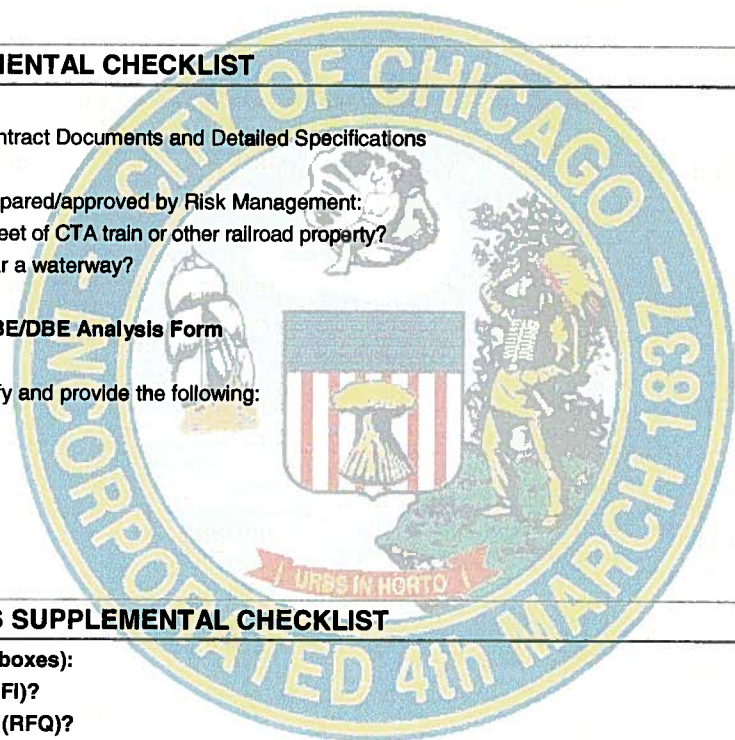
*If yes and you seek a sole source contract to hire a person as a Consultant, attach completed Office of Compliance "Request for Individual Contract Services" approval form signed by Department Head, Office of Compliance & OBM.

Is this a **Revenue Producing contract?** Yes No

Does this request involve the **purchase of Software?** Yes* No

If yes, is City required to sign a software license? Yes No

*If yes, attach descriptions of software and software license agreement.



DPS PROJECT CHECKLIST

PROFESSIONAL SERVICES SUPPLEMENTAL CHECKLIST *(continued)*

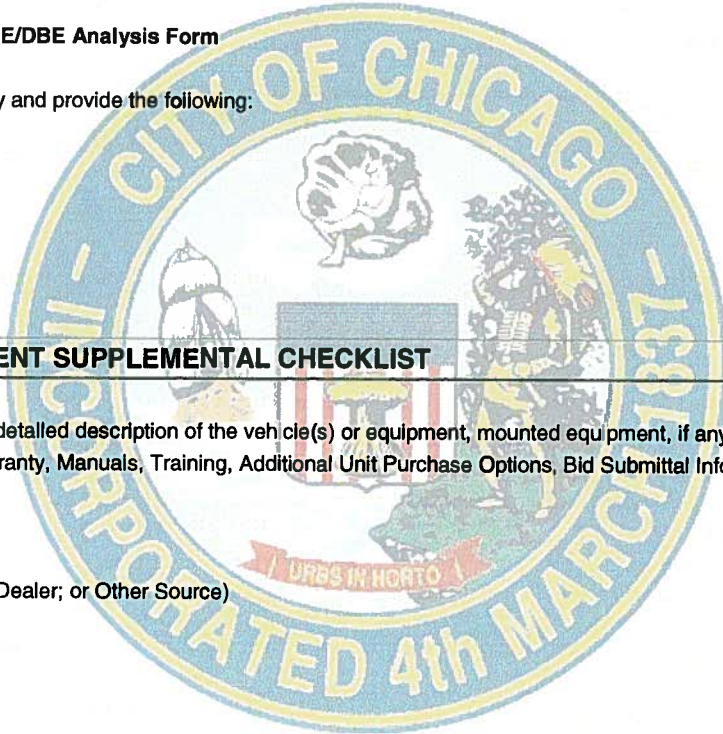
Required Attachments (IF RFP/RFQ OR SOLE SOURCE):

- Statement of Work (SOW), Deliverables or Scope of Services defined
- Does SOW involve any work in the public way? Yes* No
- *If yes, attach list of locations.
- Does SOW involve any public improvement to property that requires performance bond or prevailing wage? Yes* No
- *If yes, attach list of locations.
- Is City Council approval required? Yes No
- Project or Program Background Information
- Project Goals and Objectives
- Qualifications or Licenses/Certifications required for any disciplines
- Evaluation Criterion desired in RFP or RFQ
- Evaluation Committee (EC) members recommended. Attach list of names, titles and departments
- Technical and/or Functional Requirements, if applicable
- Cost Proposal/Schedule of Compensation structure (If Sole Source, over Contract Term by Milestone Deliverables)
- If an Information Technology (IT) project valued at \$100,000.00 or more, attach approval transmittal sheet from Information Technology Governance Board (ITGB)

Attach Recommendation of MBE/WBE/DBE Analysis Form Yes No

If Amendment request, please verify and provide the following:

- Contractor's Name:
- Contractor's Address:
- Contractor's e-mail Address:
- Contractor's Phone Number:
- Contractor's Contact Person:



VEHICLES/HEAVY EQUIPMENT SUPPLEMENTAL CHECKLIST

Required Attachments:

- Detailed Specifications including detailed description of the vehicle(s) or equipment, mounted equipment, if any, and options/accessories
- Special Provisions (Delivery, Warranty, Manuals, Training, Additional Unit Purchase Options, Bid Submittal Information, etc.)
- Delivery Location(s)
- Technical Literature
- Drawings, if any
- Part Number List (Manufacturer, or Dealer, or Other Source)
- Current Price List(s)/Catalog(s)
- Special Approval Form
- Exhibits and Attachments

Attach Recommendation of MBE/WBE/DBE Analysis Form Yes No

Is this a Revenue Producing Contract? Yes No

If Modification request, please verify and provide the following:

- Contractor's Name:
- Contractor's Address:
- Contractor's e-mail Address:
- Contractor's Phone Number:
- Contractor's Contact Person:

WORK SERVICES/FACILITY MAINTENANCE SUPPLEMENTAL CHECKLIST

Required Attachments:

- Detailed Specifications (Scope of Services) including detailed description of the work, locations (with supporting detail), user department contacts, work hours/days, laborer/supervisor mix, compensation and price escalation considerations
- Bidder's qualification, contract term and extension options
- Contractor's qualifications, citation of any applicable City/State/Federal statutes or regulations, citation of any applicable technical standards
- Price Lists/Catalogs, technical drawings and other exhibits and attachments as appropriate
- If an Information Technology (IT) project valued at \$100,000.00 or more, attach approval transmittal sheet from Information Technology Governance Board (ITGB)

Risk Management:

- Will services be performed within 50 feet (50') of CTA train or other railroad property? Yes No
- Will services be performed on or near a waterway? Yes No
- Will services require the handling of hazardous/bio-waste material? Yes No
- Will services require the blocking of streets or sidewalks which may affect public safety? Yes No

Attach Recommendation of **MBE/WBE/DBE Analysis Form**

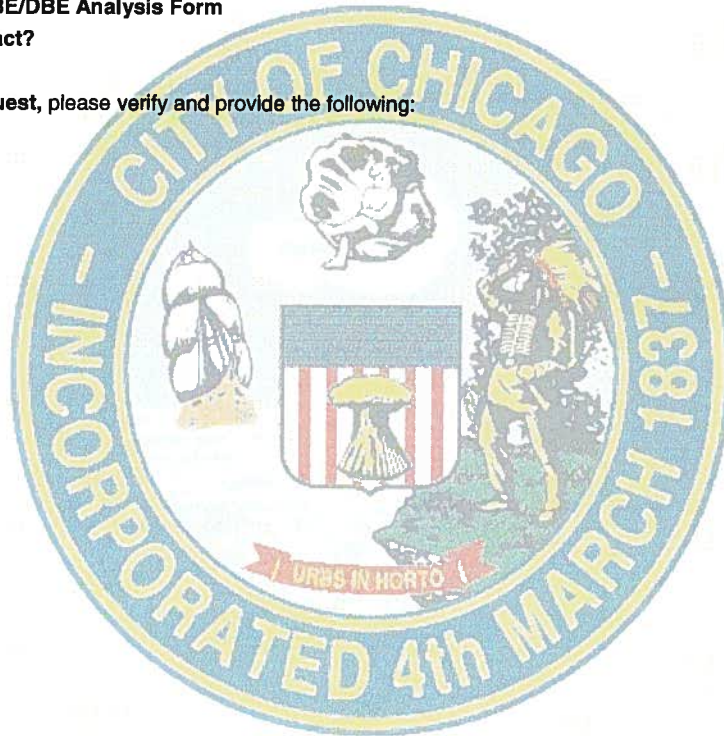
Yes No

Is this a **Revenue Producing contract**?

Yes No

If **Modification or Amendment request**, please verify and provide the following:

- Contractor's Name:
- Contractor's Address:
- Contractor's e-mail Address:
- Contractor's Phone Number:
- Contractor's Contact Person:





5025 N. Central Avenue, #494
Phoenix, AZ 85012
Voice: 602-325-9277
Fax: 866-892-2913

December 13, 2012

City of Chicago
Attn: Ms. KimLeMay Woodfork-Moore
121 N. LaSalle
Chicago, IL 60602

Re: Sole Source Justification for Amendment to PO # 18455

Dear Ms. Woodfork-Moore:

Thank you for contacting us in regards to amending our existing contract to include task order language for future enhancements to the City's B2Gnow Diversity Management System; also know as "C2".

The B2Gnow Diversity Management System is a proprietary system that has been developed exclusively by B2Gnow and is hosted exclusively by B2Gnow. No other company is qualified, authorized, or able to develop enhancements or customizations to the B2Gnow Diversity Management System. As such, all requests for enhancements or customizations must be completed exclusively by B2Gnow's technical team.

We look forward to assisting the City of Chicago with their future development needs. If you have any questions regarding B2Gnow, please don't hesitate to contact me directly at 602-325-9277.

Best Regards,

A handwritten signature in black ink, appearing to read 'Frank Begalke'.

Frank Begalke
Chief Operating Officer
AskReply, Inc. (dba B2Gnow)



5025 N. Central Avenue, #494
Phoenix, AZ 85012
Voice: 602-325-9277
Fax: 866-892-2913

December 13, 2012

City of Chicago
Attn: Ms. KimLeMay Woodfork-Moore
121 N. LaSalle
Chicago, IL 60602

Re: No Stated Goals Justification for Amendment to PO # 18455

Dear Ms. Woodfork-Moore:

Thank you for contacting us in regards to amending our existing contract to include task order language for future enhancements to the City's B2Gnow Diversity Management System; also know as "C2".

We respectfully request "No Stated Goals" on this proposed amendment, as there is no opportunity for MWBE participation within the scope. The B2Gnow Diversity Management System is a proprietary system that has been developed exclusively by B2Gnow and is hosted exclusively by B2Gnow. No other company is qualified, authorized, or able to develop enhancements or customizations to the B2Gnow Diversity Management System. As such, all requests for enhancements or customizations must be completed exclusively by B2Gnow's technical team located in Phoenix, AZ.

We look forward to assisting the City of Chicago with their future development needs. If you have any questions regarding B2Gnow, please don't hesitate to contact me directly at 602-325-9277.

Best Regards,

A handwritten signature in black ink that reads "Frank Begalke".


Frank Begalke
Chief Operating Officer
AskReply, Inc. (dba B2Gnow)



DEPARTMENT OF PROCUREMENT SERVICES
CITY OF CHICAGO

DATE: December 13, 2012

TO: Jamie L. Rhee
Chief Procurement Officer

FROM: Monica Jimenez 
Deputy Procurement Officer

SUBJECT: MWBE Waiver Request

The Department of Procurement Services concurs with the request for no stated goals per the letter from AskReply (dba/B2GNow) included in the NCRB package. There is no opportunity for MWBE participation because the Diversity Management System is proprietary and has been developed exclusively by the vendor. No other company is authorized to develop or change software related to this system.

If you have any questions, please contact Monica Jimenez at 312-744-0845.



City of Chicago
Richard M. Daley, Mayor

Department of
Procurement Services

Montel M. Gayles
Chief Procurement Officer

City Hall, Room 403
121 North LaSalle Street
Chicago, Illinois 60602
(312) 744-4900
(312) 744-2949 (TTY)

<http://www.cityofchicago.org>

REQUEST FOR WAIVER

TO: Montel M. Gayles
Chief Procurement Officer

FROM: Joy Lindsay
Contract Negotiator

DATE: August 14, 2008

User Department: Procurement Services

Description of Services: Compliance and Certification FMPS Module (C2) Hosted Service

Specification No.: TBD

Contract No.: TBD

Vendor: B2Gnow – Non-competitive Procurement (Sole Source)

Contract Amount: \$1,361,078.06

Waiver Amount: \$291,270.70
(\$230,022.19= 16.9% MBE) (\$61,248.51= 4.5 %WBE)

COMPLIANCE WITH REQUIREMENT:

PROVIDED TIMELY NOTICE TO AN APPROPRIATE ASSOCIATION

REASON(S) PURSUANT TO ORDINANCE AND REGULATIONS FOR APPROVAL:

- SOLICITED APPROPRIATE NUMBER OF MBE/WBE'S
- EXCESSIVELY COSTLY
- IMPRACTICABLE

This is a request for an annual service agreement with B2Gnow. The B2Gnow Diversity Management System, selected through a competitive evaluation process, is a proprietary system and will be provided as a hosted solution accessible via the internet. The servers and technology infrastructure providing the hosted system are owned and managed by B2Gnow at their facility in Phoenix, Arizona. Because of the proprietary nature of this service agreement, there is no direct subcontracting opportunity. Because the services will be provided in Arizona, indirect participation by MBE/WBE firms located in the Chicago area is not practicable.

CONCUR: Monica Cardenas 8/15/08
 NOT CONCUR: Monica Cardenas Deputy Procurement Officer Date

APPROVE: Montel M. Gayles 8/15/08
 DISAPPROVE: Montel M. Gayles Chief Procurement Officer Date



The following individuals will be attending the NCRB review for amendment for vendor limit increase and scope modification regarding current PO number 18455

Monica Jimenez, Deputy Procurement Officer

KimLeMay Woodfork-Moore, Assistant Procurement Officer

COBIZ INSURANCE INC/PHS
PO BOX 33015
SAN ANTONIO TX, 78265

City of Chicago
Department of Procurement Services
City Hall Room 403
121 N LA SALLE ST
CHICAGO, IL 60602



CERTIFICATE OF LIABILITY INSURANCE

LAM
R054DATE (MM/DD/YYYY)
12-13-2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER COBIZ INSURANCE INC/PHS 304801 P:(866)467-8730 F:(877)905-0457 PO BOX 33015 SAN ANTONIO TX 78265	CONTACT NAME:	
	PHONE (A/C, No, Ext): (866) 467-8730	FAX (A/C, No): (877) 905-0457
	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A : Hartford Casualty Ins Co	
INSURED ASKREPLY, INC. 5025 N CENTRAL AVE # 494 PHOENIX AZ 85012	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	GENERAL LIABILITY			59 SBA VL4231	04/18/2012	04/18/2013	EACH OCCURRENCE	\$ 1,000,000	
	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000	
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person)	\$ 10,000	
	<input checked="" type="checkbox"/> General Liab	<input checked="" type="checkbox"/>	<input type="checkbox"/>				PERSONAL & ADV INJURY	\$ 1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$ 2,000,000	
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG	\$ 2,000,000	
								\$	
A	AUTOMOBILE LIABILITY			59 SBA VL4231	04/18/2012	04/18/2013	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$	
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$
	<input checked="" type="checkbox"/> HIRED AUTOS	<input checked="" type="checkbox"/> NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$
								\$	
	UMBRELLA LIAB						EACH OCCURRENCE	\$	
	EXCESS LIAB						AGGREGATE	\$	
	DED	RETENTION \$					\$	\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATUTORY LIMITS	OTHER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N	N/A				E.L. EACH ACCIDENT	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	\$	
							E.L. DISEASE - POLICY LIMIT	\$	
A	Technology E&O			59 SBA VL4231	04/18/2012	04/18/2013	1,000,000/1,000,000		

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Those usual to the Insured's Operations. The City of Chicago is an additional insured as respects operations and activates of, or on behalf of the named insured, performed under contract with of permit from the City of Chicago.

CERTIFICATE HOLDER

City of Chicago
Department of Procurement Services
City Hall Room 403
121 N LA SALLE ST
CHICAGO, IL 60602

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Joe Tailor

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/23/12

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

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PRODUCER
Aon Risk Services, Inc of Florida
1001 Brickell Bay Drive, Suite #1100
Miami, FL 33131-4937

CONTACT NAME: Aon Risk Services, Inc of Florida
PHONE (A/C, No, Ext): 800-743-8130 **FAX (A/C, No):** 800-522-7514
EMAIL ADDRESS: ADP.COI.Center@Aon.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : New Hampshire Ins Co	23841
INSURER B :	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
ADP TotalSource FL XXIX, Inc.
10200 Sunset Drive
Miami, FL 33173
L/C/F
Askrepley Inc. DBA B2G Now
1661 E.Camelback Rd. Ste. 380
Phoenix, AZ 85016

COVERAGES

CERTIFICATE NUMBER: 413250

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. LIMITS SHOWN ARE AS REQUESTED.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY						EACH OCCURRENCE \$
	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$
	<input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR						MED EXP (Any one person) \$
							PERSONAL & ADV INJURY \$
							GENERAL AGGREGATE \$
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG \$
	<input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS						PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS						\$
	<input type="checkbox"/> NON-OWNED AUTOS						
	UMBRELLA LIAB <input type="checkbox"/> OCCUR						EACH OCCURRENCE \$
	EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE \$
	<input type="checkbox"/> DEC <input type="checkbox"/> RETENTION \$						
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WC 035051318 AZ	04/01/12	07/01/12	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		N/A				E.L. EACH ACCIDENT \$ 2,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$ 2,000,000
							E.L. DISEASE - POLICY LIMIT \$ 2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
All worksite employees working for the above named client company, paid under ADP TOTAL SOURCE, INC's payroll, are covered under the above stated policy.

CERTIFICATE HOLDER**CANCELLATION**

City of Chicago
Department of Procurement Services
City Hall Room 403
121 North LaSalle Street
Chicago, IL 60602

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Aon Risk Services, Inc of Florida

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/23/12

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PRODUCER

Aon Risk Services, Inc of Florida
1001 Brickell Bay Drive, Suite #1100
Miami, FL 33131-4937

CONTACT NAME:

Aon Risk Services, Inc of Florida

PHONE

(A/C, No, Ext): 800-743-8130

FAX

(A/C, No): 800-522-7514

EMAIL

ADDRESS: ADP.COI.Center@Aon.com

INSURER(S) AFFORDING COVERAGE**NAIC #**

INSURER A : New Hampshire Ins Co

23841

INSURER B :

INSURER C :

INSURER D :

INSURER E :

INSURER F :

INSURED

ADP TotalSource FL XXIX, Inc.
10200 Sunset Drive
Miami, FL 33173
L/C/F
Askreply Inc. DBA B2G Now
1661 E.Camelback Rd. Ste. 380
Phoenix, AZ 85016

COVERAGES

CERTIFICATE NUMBER: 448940

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. LIMITS SHOWN ARE AS REQUESTED.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY						EACH OCCURRENCE \$
	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$
	<input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR						MED EXP (Any one person) \$
							PERSONAL & ADV INJURY \$
							GENERAL AGGREGATE \$
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG \$
	<input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS						PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS						\$
	<input type="checkbox"/> NON-OWNED AUTOS						
	UMBRELLA LIAB						EACH OCCURRENCE \$
	<input type="checkbox"/> OCCUR						AGGREGATE \$
	EXCESS LIAB						
	<input type="checkbox"/> CLAIMS-MADE						
	DEC						
	RETENTION \$						
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WC 038093457 AZ	07/01/12	07/01/13	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						E.L. EACH ACCIDENT \$ 2,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				E.L. DISEASE - EA EMPLOYEE \$ 2,000,000
							E.L. DISEASE - POLICY LIMIT \$ 2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

All worksite employees working for the above named client company, paid under ADP TOTAL SOURCE, INC's payroll, are covered under the above stated policy.

CERTIFICATE HOLDER

City of Chicago
Department of Procurement Services
City Hall Room 403
121 North LaSalle Street
Chicago, IL 60602

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Aon Risk Services, Inc of Florida

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CERTIFICATE OF FILING FOR
CITY OF CHICAGO ECONOMIC DISCLOSURE STATEMENT

EDS Number: 33120
Certificate Printed on: 06/29/2012

Date of This Filing:06/29/2012 09:47 AM
Original Filing Date:06/29/2012 09:47 AM

Disclosing Party: AskReply, Inc.
Filed by: Frank Begalke

Title:Chief Operating Officer

Matter: Amendment for C2 Hosted Services
Applicant: AskReply, Inc.
Specification #: 68442
Contract #: 18455

The Economic Disclosure Statement referenced above has been electronically filed with the City. Please provide a copy of this Certificate of Filing to your city contact with other required documents pertaining to the Matter. For additional guidance as to when to provide this Certificate and other required documents, please follow instructions provided to you about the Matter or consult with your City contact.

A copy of the EDS may be viewed and printed by visiting <https://webapps.cityofchicago.org/EDSWeb> and entering the EDS number into the EDS Search. Prior to contract award, the filing is accessible online only to the disclosing party and the City, but is still subject to the Illinois Freedom of Information Act. The filing is visible online to the public after contract award.

(DO NOT SUBMIT THIS PAGE WITH YOUR EDS. The purpose of this page is for you to recertify your EDS prior to submission to City Council or on the date of closing. If unable to recertify truthfully, the Disclosing Party must complete a new EDS with correct or corrected information)

RECERTIFICATION

Generally, for use with City Council matters. Not for City procurements unless requested.

This recertification is being submitted in connection with amendment to PO# 18455 [identify the Matter]. Under penalty of perjury, the person signing below: (1) warrants that he/she is authorized to execute this EDS recertification on behalf of the Disclosing Party, (2) warrants that all certifications and statements contained in the Disclosing Party's original EDS are true, accurate and complete as of the date furnished to the City and continue to be true, accurate and complete as of the date of this recertification, and (3) reaffirms its acknowledgments.

Ask Reply, Inc (d/b/a B2Gnow)
(Print or type legal name of Disclosing Party)

Date: 12/13/12

By:

Frank Begalke
(sign here)

Print or type name of signatory:

Frank Begalke

Title of signatory:

Chief Operating Officer

Signed and sworn to before me on [date] Dec. 13, 2012, by
Frank Begalke, at Maricopa County, AZ [state].

Victoria C. Morris Notary Public.

Commission expires: Nov. 15, 2013

