08/20/20

RESOLUTION NO. 22065

Background

It is necessary and desirable for The Illinois State Toll Highway Authority ("Tollway") to retain certain financial firms to provide, on an as-needed basis, underwriting services in connection with the issuance of new bonds.

Pursuant to competitive procurement process RFP#16-0155, on June 22, 2017, the Tollway approved Resolution No. 21288 authorizing, for an initial term of three years, the Chairman or the Executive Director to assign, as needed for each bond issuance, a bond underwriting group consisting of firms from a Senior Pool and Co-Manager Pool, each as authorized by the same Resolution.

The Senior Pool consists of the following financial firms authorized to serve as senior managing underwriter and co-senior managing underwriter (collectively, "Senior Pool"):

Citigroup Global Markets Inc.;

Goldman, Sachs & Co.;

Jefferies LLC:

J.P. Morgan Securities LLC;

Loop Capital Markets LLC;

BofA Securities, Inc. (formerly Merrill Lynch Pierce Fenner & Smith Incorporated);

Morgan Stanley & Co. LLC;

Piper Sandler & Co. (formerly Piper Jaffray & Co.);

PNC Capital Markets LLC;

RBC Capital Markets, LLC;

Samuel A. Ramirez & Co., Inc.;

Siebert Williams Shank & Co., LLC (formerly Siebert Cisneros Shank & Co. LLC);

and Wells Fargo Bank, N.A.

RESOLUTION NO. 22065

Background - Continued

The Co-Manager Pool consists of the following financial firms authorized to serve as co-managing underwriter (collectively, "Co-Manager Pool"):

Academy Securities, Inc.;

Bernardi Securities Inc.;

Blaylock Van, LLC;

Cabrera Capital Markets, LLC;

Hutchinson Shockey Erley & Co.;

Janney Montgomery Scott LLC;

KeyBanc Capital Markets Inc.;

Mesirow Financial, Inc.;

Oppenheimer & Co. Inc.;

Raymond James & Associates, Inc.;

Rice Securities, LLC;

Robert W. Baird & Co. Incorporated; and

Stifel Nicolaus & Company, Inc.

The initial term of the Senior Pool and Co-Manager Pool ends October 14, 2020.

Resolution

The one-year renewal of the Senior Pool and Co-Manager Pool is approved. The Executive Director, Chief Financial Officer, Chief Procurement and Compliance Officer and Chief of Contract Services are authorized to execute any and all documents, subject to the review and approval of the General Counsel, necessary to effectuate the one-year renewal of the Senior Pool and Co-Manager Pool for the period October 15, 2020 through October 14, 2021; provided that there is no increase to the rates per compensation per \$1,000 par amount of bonds contained in the original agreements. The Chief Financial Officer is authorized to issue warrants in payment thereof.

Approved by:

Chairman

STATE OF ILLINOIS CONTRACT RENEWAL

Illinois Tollway

Bond Underwriting Services 16-0155L

| Conf | tract | Rene | wal |
|------|-------|--------|------|
| COIL | uavi | IZCIIC | w ai |

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|---------------|---|---|---|------------|
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The undersigned Agency and Vendor, Siebert Williams Shank &Co LLC. (the Parties) agree that the following shall renew the Contract referenced herein. All terms and conditions set forth in the original Contract, not amended herein, shall remain in full force and effect as written. In the event of conflict, the terms of this Renewal shall prevail.

IN WITNESS WHEREOF, the Agency and the Vendor cause this Renewal to be executed on the dates shown below by representatives authorized to bind the respective PARTIES.

VENDOR

| Vendor Name: Siebert Williams Shank &Co., LLC. | Address: 625 N Michigan Ave, Suite 1740, Chicago, IL 60611 | |
|--|--|--|
| Signature: | Phone: 312-759-1044 | |
| Printed Name: Ramon Ortega | Fax: 312-759-0109 | |
| Title: Managing Director | Email: rortega@siebertwilliams.com | |
| Date:09/30/2020 | | |

STATE OF ILLINOIS

| Procuring Agency or University: Illinois Tollway | Phone: 630/241-6800 | |
|---|---------------------|--|
| Street Address: 2700 Ogden Avenue | Fax: : 630-795-7908 | |
| City, State ZIP: Downers Grove, IL 60515 | | |
| Official Signature: Willard S. Evans, Jr. (Oct 14, 2020 20:53 CDT) | Date: 10/14/2020 | |
| Printed Name: Willard S. Evans, Jr. | | |
| Official's Title: Chairman and Chief Executive Officer | | |
| Official Signature: Jose Alvarez (Oct 14, 2020 15:19 CDT) | Date: 10/14/2020 | |
| Printed Name: José R. Alvarez | | |
| Official's Title: Executive Director | | |
| Approved as to Form and Constitutionality Legal Signature: Robert Lane, A.A.G. (Oct 14, 2020 12:50 CDT) | Date: 10/14/2020 | |
| Legal Printed Name: Robert T. Lane | | |
| Legal's Title: Assistant Attorney General, State of Illinois | | |

| Finance Signature: Cathy R Williams (Oct 14, 2020 12:59 CDT) | Date: | 10/14/2020 |
|---|-------|------------|
| Finance Printed Name: Cathy R. Williams | | |
| Finance's Title: Chief Financial Officer | | |
| Legal Signature: Kathleen R. Pasulka-Brown (Oct 14, 2020 12:51 CDT) | Date: | 10/14/2020 |
| Legal Printed Name: Kathleen R. Pasulka-Brown | | |
| Legal's Title: General Counsel | | |
| Procurement Signature: Eric Occomy (Oct 14, 2020 14:17 (T) | Date: | 10/14/2020 |
| Procurement Printed Name: Eric Occomy | | |
| Procurement's Title: Chief of Contract Services | | |

| STATE USE ONLY NOT PART OF CONTRACTUA | | CONTRACTUAL PROVISIONS |
|---------------------------------------|-----------------------------|------------------------|
| BidBuy REQ# R-75276 | Project Title Bond Underw | riting Services |
| Contract # 16-0155L | Procurement Method (IFB, RF | P, Small, etc): RFP |
| BidBuy Bid. # B-17477 | IPB Publication Date: | Award Code: B |
| Subcontractor Utilization? ☐ Yes ☐ No | Subcontractor Disclosure? | Yes No |
| Funding Source | Obligation # | |
| CPO 33 – General Counsel Approval: | | |
| Signature | Printed Name | Date |
| | | |

- 1. **DESCRIPTION OF CONTRACT BEING RENEWED** (include original contract number): Contract #16-0155L Bond Underwriting Services (SAP# 4100104780)
- **TERMS AND CONDITIONS:** This Renewal is on the same terms and conditions as the Contract being renewed except as changed and described herein.
- **3. RENEWAL TERM**: This RENEWAL shall begin October 15, 2020 and shall run through October 14, 2021.
- 4. **COSTS** (describe calculation and/or cost basis, if applicable): The value of this renewal contract is \$468,000.00 This value is approved by the Tollway's Board of Directors and may be modified pursuant to Tollway Board approval as provided by written resolution or otherwise in accordance with authority delegated by the Board.
 - 4.1. Renewal Pricing:

The pricing for the Renewal shall be at the same rate as the initial term.

- **MAXIMUM AMOUNT:** Vendor's compensation for (services) under this renewal Contract shall not exceed \$561,000.00 during this renewal term without a formal amendment.
- **6. SUBCONTRACTORS:** Will subcontractors be utilized? ☐ Yes ⋈ No
 - Subcontractor Name: Click here to enter text.

Amount to be paid: Click here to enter text.

Address: Click here to enter text.

Description of work: Click here to enter text.

- 6.1. All contracts with the subcontractors identified above must include the Standard Certifications completed and signed by the subcontractor.
- 6.2. If the annual value of any the subcontracts is more than \$50,000, then the Vendor must provide to the State the Financial Disclosures and Conflicts of Interest for that subcontractor.
- 6.3. If the subcontractor is registered in the Illinois Procurement Gateway (IPG) and the Vendor is using the subcontractor's Standard Certifications or Financial Disclosures and Conflicts of Interest from the IPG, then the Vendor must also provide a completed Forms B for the subcontractor.
- 6.4. If at any time during the term of the Contract, Vendor adds or changes any subcontractors, Vendor will be required to promptly notify, in writing, the State Purchasing Officer or the Chief Procurement Officer of the names and addresses and the expected amount of money that each new or replaced subcontractor will receive pursuant to the Contract. Any subcontracts entered into prior to award of the Contract are done at the Vendor's and subcontractor's risk.

STATE OF ILLINOIS TAXPAYER IDENTIFICATION NUMBER

I certify that:

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

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

I am a U.S. person (including a U.S. resident alien).

- If you are an individual, enter your name and SSN as it appears on your Social Security Card.
- If you are a sole proprietor, enter the owner's name on the name line followed by the name of the business and the owner's SSN or EIN.
- If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's name on the name line and the D/B/A on the business name line and enter the owner's SSN or EIN.
- If the LLC is a corporation or partnership, enter the entity's business name and EIN and for corporations, attach IRS acceptance letter (CP261 or CP277).
- For all other entities, enter the name of the entity as used to apply for the entity's EIN and the EIN.

Name: Click here to enter text.

Business Name: Siebert Williams Shank & Co., LLC

Taxpayer Identification Number:

Social Security Number: Click here to enter text.

or

Employer Identification Number:

Legal Status (check one):

Individual

Sole Proprietor

Partnership

Estate or trust

| Legal Services Corporation | Pharmacy (Non-Corp.) |
|--------------------------------------|--|
| Tax-exempt | Pharmacy/Funeral Home/Cemetery (Corp.) |
| Corporation providing or billing | ∐ Limited Liability Company |
| medical and/or health care services | (select applicable tax classification) |
| Corporation NOT providing or billing | C = corporation |
| medical and/or health care services | P = partnership |
| | |
| | |

Signature of Authorized Representative:

Date: October 6, 2020

STATE OF ILLINOIS FORMS B CERTIFICATIONS AND DISCLOSURES

BidBuy Reference #: B-17477 Procurement/Contract #: 16-0155

This Forms B may be used when responding to an Invitation for Bid (IFB) or a Request for Proposal (RFP) if the vendor is registered in the Illinois Procurement Gateway (IPG) and has an active State of Illinois Vendor Registration Number. The IPG assigns a unique State of Illinois Vendor Registration Number and expiration date upon the Chief Procurement Office's acceptance of an IPG application.

If a vendor does not have an active State of Illinois Vendor Registration Number, then the vendor must complete and submit Forms A with their response. Failure to do so may render the submission non-responsive and result in disqualification.

Please read this entire section and provide the requested information as applicable. All parts in Forms B must be completed in full and submitted along with the vendor's response.

1. Certification of Illinois Procurement Gateway Registration

My business has an active State of Illinois Vendor Registration Number.

To ensure that you have an active registration in the IPG, search for your business name in the IPG Registered Vendor Directory. If your company does not appear in the search results, then you do not have an active IPG registration.

State of Illinois Vendor Registration Number: IPG-0369776

IPG Expiration Date: 04/13/2021

2. Certification Timely to this Solicitation or Contract

Vendor certifies it is not barred from having a contract with the State based upon violating the prohibitions related to either submitting/writing specifications or providing assistance to an employee of the State of Illinois by reviewing, drafting, directing, or preparing any invitation for bids, a request for proposal, or request of information, or similar assistance (except as part of a public request for such information). 30 ILCS 500/50-10.5(e).

☐ Yes ☐ No

3. Disclosure of Lobbyist or Agent (Complete only if bid, offer, or contract has an annual value over \$50,000)

Is your company or parent entity(ies) represented by or do you or your parent entity(ies) employ a lobbyist required to register under the Lobbyist Registration Act (lobbyist must be registered pursuant to the Act with the Secretary of State) or an agent who has communicated, is communicating, or may communicate with any State officer or employee concerning the bid or offer? If yes, please identify each lobbyist and agent, including the name and address below. \square Yes \boxtimes No

If yes, please identify each lobbyist and agent, including the name and address below. If you have a lobbyist that does not meet the criteria, then you do not have to disclose the lobbyist's information. Additional rows may be inserted into the table or an attachment may be provided if needed.

1

STATE OF ILLINOIS FORMS B CERTIFICATIONS AND DISCLOSURES

| Name | Address | Relationship to Disclosing Entity |
|---------------------------|---------------------------|-----------------------------------|
| Click here to enter text. | Click here to enter text. | Click here to enter text. |
| | | |

Describe all costs/fees/compensation/reimbursements related to the assistance provided by each representative lobbyist or other agent to obtain this Agency contract: Click here to enter text.

4. Disclosure of Current and Pending Contracts

Complete only if: (a) your business is for-profit and (b) the bid, offer, or contract has an annual value over \$50,000. Do not complete if you are a not-for-profit entity.

Yes No. Do you have any contracts, pending contracts, bids, proposals, subcontracts, leases or other ongoing procurement relationships with units of State of Illinois government?

If "Yes", please specify below. Additional rows may be inserted into the table or an attachment in the same format may be provided if needed.

| Agency | Project Title | Status | Value | Contract Reference/P.O./Illinois Procurement Bulletin # |
|---------------------------|---------------------------|---------------------------|---------------------------|---|
| Illinois Tollway | Bond Underwriting | Click here to enter text. | Click here to enter text. | Contract #16-0155 |
| Click here to enter text. |

5. Signature

As of the date signed below, I certify that:

- My business' information and the certifications made in the Illinois Procurement Gateway are truthful and accurate.
- The certifications and disclosures made in this Forms B are truthful and accurate.

This Forms B is signed by an authorized officer or employee on behalf of the bidder, offeror, or vendor pursuant to Sections 50-13 and 50-35 of the Illinois Procurement Code, and the affirmation of the accuracy of the financial disclosures is made under penalty of perjury.

This disclosure information is submitted on behalf of:

Vendor Name: Siebert Williams Shank & Co., LLC Phone: (212) 830-4559

Street Address: 100 Wall Street, 18th Floor Email: compliance@siebertwilliams.com

City, State, Zip: New York, NY 10005 Vendor Contact: SWS Compliance Department

Signature: ____ Date: October 6, 2020

Printed Name: DiAnne Calabrisotto

Title: Chief Operating & Chief Compliance Officer
State of Illinois Chief Procurement Office General Services
FORMS B Certifications and Disclosures
V.20.1

Siebert Williams Shank & Co., LLC

| Vendor Registration | |
|---|--|
| TYPE | State of Illinois Vendor Registration (Renew/Update) |
| DESCRIPTION | Register to do business with the State of Illinois |
| DATE SUBMITTED | 4/13/2020 |
| STATUS | Accepted |
| STATE OF ILLINOIS VENDOR REGISTRATION NUMBER | IPG-0369776 |
| REVIEWER | Maribeth Christmon |
| DATE REVIEWED | 4/13/2020 |
| PUBLIC REVIEW COMMENTS | |
| PRIVATE REVIEW COMMENTS | |
| EXPIRATION DATE | 4/13/2021 |
| FLAG FORM | |

Settings

SMALL BUSINESS SET-ASIDE PROGRAM

(SBSP) REGISTERED

No

REGISTERING AS A Prime

Entity Information

BUSINESS NAME Siebert Williams Shank & Co., LLC

CONTACT FOR THIS SUBMISSION Melissa Little (change contact)

PRIMARY CONTACT EMAIL <u>mlittle@siebertwilliams.com</u>

PHONE **646-775-4853**FAX **646-576-9680**

COMPANY EMAIL mlittle@siebertwilliams.com

TAX ID NUMBER

COMPANY TYPE LLC

ADDRESS 100 Wall Street, 18th Floor

New York, NY 10005

[<u>edit address</u>]

Current Vendor Certifications

Type Effective Renewal Organization

| Forms | | |
|-------------|---|-----|
| View | Form Name Flagg | ged |
| <u>View</u> | A - B. Business Information & Additional Information | |
| <u>View</u> | C. Small Business Set-Aside Program | |
| View | D - E. Department of Human Rights (DHR) & Authorized to do Business in Illinois | |
| View | F - G. Certifications & Board of Elections | |
| View | H. Iran Disclosure | |
| <u>View</u> | I. Financial Disclosure & Conflicts of Interest | |
| | | |

| NIGP Codes | |
|------------|---|
| NIGP 94625 | Banking Services |
| NIGP 94648 | Financial Advisor |
| NIGP 94649 | Financial Services (Not Otherwise Classified) |
| | |

| iona | l Infor | rmation | |
|------|-------------|--|--|
| HED | Documen | nt | Status |
|) [| <u> </u> | IPG Application Review Sheet - Siebert Williams Shank Co. LLC.pdf Filename: IPG_Application_Review_SheetSiebert_Williams_Shank_CoLLC_20200305123852_7568.pdf | PDF, 1.65 MB Edit Info Delete Attached by Keely Burton on 3/5/2020 |
| | <u>(</u> | Siebert Williams Shank and Co LLC-4.7.2020-IPG Application Review Sheet.pdf Filename: Siebert_Williams_Shank_and_Co_LLC-4.7.2020- IPG_Application_Review_Sheet_20200407130001_3951.pdf | PDF, 3.29 MB Edit Info Delete Attached by Chris Haberman on 4/7/2020 |
| | [à ± | <u>Siebert Williams Shank and Co-4.1.2020-IPG Application Review Sheet.pdf</u> Filename: Siebert_Williams_Shank_and_Co-4.1.2020- IPG_Application_Review_Sheet_20200401083953_8990.pdf | PDF, 3.29 MB Edit Info Delete Attached by Chris Haberman on 4/1/2020 |
| | [à ± | <u>Siebert Williams Shank and Co. LLC 04.13.2020 IPG Application Review Sheet.pdf</u> Filename: Siebert_Williams_Shank_and_CoLLC_04.13.2020_IPG_Application_Review_Sheet_20200413115045_7216.pdf | PDF, 0.92 MB <u>Edit Info</u> <u>Delete</u> |

| | | Attached by Maribeth Christmon on 4/13/2020 |
|---------------------|---|--|
| <u>L</u> à ± | Siebert Williams Shank and Co. LLC 2 04.13.2020 IPG Application Review Sheet.pdf Filename: Siebert_Williams_Shank_and_CoLLC_2_04.13.2020_IPG_Application_Review_Sheet_20200413121150_0666.pdf | PDF, 0.92 MB Edit Info Delete Attached by Maribeth Christmon on 4/13/2020 |
| <u>(</u> | Siebert Williams Shank and Co. LLC-3.25.2020-IPG Application Review Sheet.pdf Filename: Siebert_Williams_Shank_and_CoLLC-3.25.2020-IPG_Application_Review_Sheet_20200325163746_0465.pdf | PDF, 175.44 KB Edit Info Delete Attached by Chris Haberman on 3/25/2020 |



A - B. Business Information & Additional Information Siebert Williams Shank & Co., LLC

| Vendor Registration | | |
|---------------------|---|--|
| FORM NAME | A - B. Business Information & Additional Information | |
| DESCRIPTION | Complete section A and B, in order to submit this form. | |
| DATE SUBMITTED | 4/13/2020 | |
| STATUS | Accepted | |
| BUSINESS NAME | Siebert Williams Shank & Co., LLC | |
| POINT OF CONTACT | Melissa Little | |
| FLAG FORM | | |

| A. Business Information | | |
|--|---|------|
| 1. YOUR BUSINESS IS REGISTERING AS A | Prime | שיין |
| 2. NAME OF CEO/BUSINESS OWNER | Suzanne Shank | j=vo |
| 3. ANNUAL SALES/GROSS RECEIPTS | 36,477,606 | שיין |
| 4. WHEN WAS YOUR BUSINESS ESTABLISHED? | 03/10/1997 | חול |
| 5. IN WHAT ILLINOIS COUNTY(IES) ARE YOU CONDUCTING BUSINESS? | The business conducts business statewide. | חוץ |
| 6. CONTACT PERSON FOR THIS VENDOR REGISTRATION | Ramon Ortega | חול |
| CONTACT PERSON TITLE | Managing Director | |
| CONTACT PERSON PHONE | 312-759-1040 | |
| CONTACT PERSON EMAIL | rortega@siebertwilliams.com | |

| B. Additional Information | | | | | |
|--|---|------|--|--|--|
| 1. HOW DID YOU LEARN ABOUT THE ILLINOIS PROCUREMENT GATEWAY? | Business Enterprise Program (BEP) / Veterans Business Program (VBP) Chief Procurement Office (CPO) State Agency | שיין | | | |

Additional Information

| STAFF ATTACHED FILE(S) | | |
|------------------------|--|--|
| | | |

C. Small Business Set-Aside Program

Siebert Williams Shank & Co., LLC

| Vendor Registration | |
|---------------------|--|
| FORM NAME | C. Small Business Set-Aside Program |
| DESCRIPTION | Complete the Small Business Set-Aside Program form |
| DATE SUBMITTED | 4/13/2020 |
| STATUS | Accepted |
| BUSINESS NAME | Siebert Williams Shank & Co., LLC |
| POINT OF CONTACT | Melissa Little |
| FLAG FORM | |

| C. Small Business Set-Aside Program | | | | | |
|--|----|-------|--|--|--|
| 1. WOULD YOU LIKE TO APPLY/RE- QUALIFY FOR THE SMALL BUSINESS SET-ASIDE PROGRAM? | No | ישרין | | | |

| Additional Information | |
|------------------------|--|
| STAFF ATTACHED FILE(S) | |

D - E. Department of Human Rights (DHR) & Authorized to do Business in Illinois Siebert Williams Shank & Co., LLC

| Vendor Registration | | | |
|---------------------|---|--|--|
| FORM NAME | D - E. Department of Human Rights (DHR) & Authorized to do Business in Illinois | | |
| DESCRIPTION | Complete section D and E, in order to submit this form. | | |
| DATE SUBMITTED | 4/13/2020 | | |
| STATUS | Accepted | | |
| BUSINESS NAME | Siebert Williams Shank & Co., LLC | | |
| POINT OF CONTACT | Melissa Little | | |
| FLAG FORM | | | |

| D. Department of Human Ri | gnts (Dnk) | |
|---|--|-----|
| 1. HIGHEST NUMBER OF EMPLOYEES (INCLUDING FULL AND PART TIME EMPLOYEES) AT ANY TIME DURING THE PAST YEAR | 125 | jud |
| 2. SELECT THE DHR STATUS OF YOUR BUSINESS | My business had 15 or more employees at any time within the past year. 94936-00 | ju |

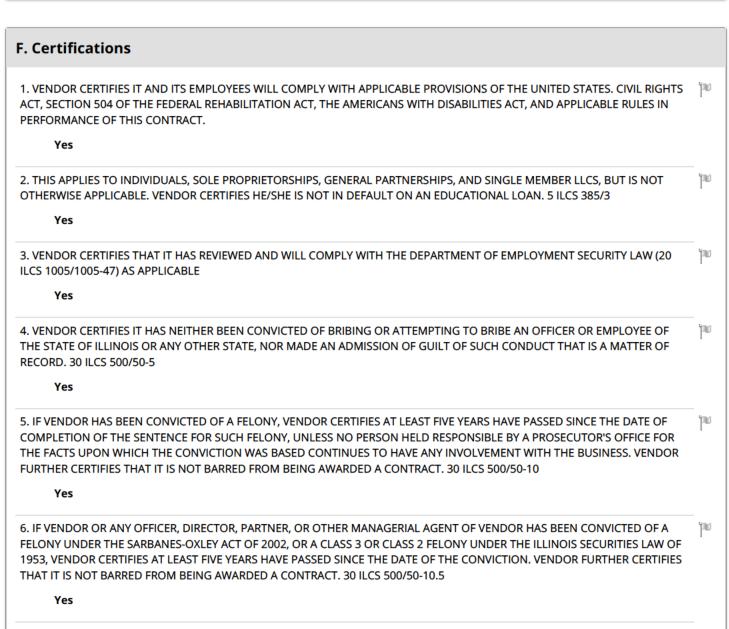
| E. Authorized to do Business in Illinois | | | | | |
|---|---|--|--|--|--|
| 1. IS YOUR BUSINESS REGISTERED AND AUTHORIZED TO DO BUSINESS IN ILLINOIS? | Yes, registered and in good standing with the Illinois Secretary of State | ort ———————————————————————————————————— | | | |



F - G. Certifications & Board of Elections

Siebert Williams Shank & Co., LLC

| endor Registration | |
|--------------------|--|
| FORM NAME | F - G. Certifications & Board of Elections |
| DESCRIPTION | Complete section F - G, in order to submit the form. |
| DATE SUBMITTED | 4/13/2020 |
| STATUS | Accepted |
| BUSINESS NAME | Siebert Williams Shank & Co., LLC |
| POINT OF CONTACT | Melissa Little |
| FLAG FORM | |



| Yes | |
|--|----|
| 3. VENDOR CERTIFIES THAT IT AND ALL AFFILIATES SHALL COLLECT AND REMIT ILLINOIS USE TAX ON ALL SALES OF TANGIBLE PERSONAL PROPERTY INTO THE STATE OF ILLINOIS IN ACCORDANCE WITH PROVISIONS OF THE ILLINOIS USE TAX ACT. 30 ILCS 500/50-12 | |
| Yes | |
| V. VENDOR CERTIFIES THAT IT HAS NOT BEEN FOUND BY A COURT OR THE POLLUTION CONTROL BOARD TO HAVE COMMITTED A WILLFUL OR KNOWING VIOLATION OF THE ENVIRONMENTAL PROTECTION ACT WITHIN THE LAST FIVE YEARS, AND IS THEREFORE HOT BARRED FROM BEING AWARDED A CONTRACT. 30 ILCS 500/50-14 Yes | |
| 0. VENDOR CERTIFIES IT HAS NEITHER PAID ANY MONEY OR VALUABLE THING TO INDUCE ANY PERSON TO REFRAIN FROM BIDDING ON A STATE CONTRACT, NOR ACCEPTED ANY MONEY OR OTHER VALUABLE THING, OR ACTED UPON THE PROMISE OF AME, FOR NOT BIDDING ON A STATE CONTRACT. 30 ILCS 500/50-25 Yes | |
| 1. VENDOR CERTIFIES IT HAS READ, UNDERSTANDS AND IS NOT KNOWINGLY IN VIOLATION OF THE "REVOLVING DOOR" ROVISION OF THE ILLINOIS PROCUREMENT CODE. 30 ILCS 500/50-30 | |
| Yes | |
| 2. VENDOR CERTIFIES THAT IF IT HIRES A PERSON REQUIRED TO REGISTER UNDER THE LOBBYIST REGISTRATION ACT TO ASSIST N OBTAINING ANY STATE CONTRACT, THAT NONE OF THE LOBBYIST'S COSTS, FEES, COMPENSATION, REIMBURSEMENTS OR OTHER REMUNERATION WILL BE BILLED TO THE STATE. 30 ILCS 500/50-38 Yes | |
| 3. VENDOR CERTIFIES THAT IT WILL NOT RETAIN A PERSON OR ENTITY TO ATTEMPT TO INFLUENCE THE OUTCOME OF A PROCUREMENT DECISION FOR COMPENSATION CONTINGENT IN WHOLE OR IN PART UPON THE DECISION OR PROCUREMENT.3 LCS 500/50-38 |) |
| Yes | |
| 4. VENDOR CERTIFIES IT WILL REPORT TO THE ILLINOIS ATTORNEY GENERAL AND THE CHIEF PROCUREMENT OFFICER ANY USPECTED COLLUSION OR OTHER ANTI-COMPETITIVE PRACTICE AMONG ANY BIDDERS, OFFERORS, CONTRACTORS, PROPOSERS OR EMPLOYEES OF THE STATE. 30 ILCS 500/50-40, 50-45, 50-50 Yes | ·, |
| 5. VENDOR CERTIFIES THAT IF IT IS AWARDED A CONTRACT THROUGH THE USE OF THE PREFERENCE REQUIRED BY THE PROCUREMENT OF DOMESTIC PRODUCTS ACT, THEN IT SHALL PROVIDE PRODUCTS PURSUANT TO THE CONTRACT OR A UBCONTRACT THAT ARE MANUFACTURED IN THE UNITED STATES. 30 ILCS 517 Yes | |
| Tes | |
| 6. VENDOR CERTIFIES THAT IF AWARDED A CONTRACT FOR PUBLIC WORKS, STEEL PRODUCTS USED OR SUPPLIED IN THE ERFORMANCE OF THAT CONTRACT SHALL BE MANUFACTURED OR PRODUCED IN THE UNITED STATES, UNLESS THE EXECUTIVE EAD OF THE PROCURING AGENCY/UNIVERSITY GRANTS AN EXCEPTION IN WRITING. 30 ILCS 565 | |
| Yes | |
| 7. IF VENDOR IS AWARDED A CONTRACT WORTH MORE THAN \$5,000 AND EMPLOYS 25 OR MORE EMPLOYEES, VENDOR ERTIFIES IT WILL PROVIDE A DRUG FREE WORKPLACE PURSUANT TO THE DRUG FREE WORKPLACE ACT. 30 ILCS 580 | |
| Yes | |
| 8. IF VENDOR IS AN INDIVIDUAL AND IS AWARDED A CONTRACT WORTH MORE THAN \$5,000, VENDOR CERTIFIES IT SHALL NOT | |

ENGAGE IN THE UNLAWFUL MANUFACTURE, DISTRIBUTION, DISPENSATION, POSSESSION, OR USE OF A CONTROLLED SUBSTANCE DURING THE PERFORMANCE OF THE CONTRACT PURSUANT TO THE DRUG FREE WORKPLACE ACT. 30 ILCS 580 Yes 19. VENDOR CERTIFIES THAT NEITHER VENDOR NOR ANY SUBSTANTIALLY OWNED AFFILIATE IS PARTICIPATING OR SHALL 'n PARTICIPATE IN AN INTERNATIONAL BOYCOTT IN VIOLATION OF THE U.S. EXPORT ADMINISTRATION ACT OF 1979 OR THE APPLICABLE REGULATIONS OF THE UNITED STATES DEPARTMENT OF COMMERCE. 30 ILCS 582 Yes 20. VENDOR CERTIFIES THAT NO FOREIGN-MADE EQUIPMENT, MATERIALS, OR SUPPLIES FURNISHED TO THE AGENCY/UNIVERSITY UNDER ANY CONTRACT HAVE BEEN OR WILL BE PRODUCED IN WHOLE OR IN PART BY FORCED LABOR OR INDENTURED LABOR UNDER PENAL SANCTION, 30 ILCS 583 Yes 21. VENDOR CERTIFIES THAT NO FOREIGN-MADE EQUIPMENT, MATERIALS, OR SUPPLIES FURNISHED TO THE AGENCY/UNIVERSITY UNDER ANY CONTRACT HAVE BEEN PRODUCED IN WHOLE OR IN PART BY THE LABOR OR ANY CHILD UNDER THE AGE OF 12. 30 ILCS 584 Yes 'nΨ 22. VENDOR CERTIFIES THAT IF AWARDED A CONTRACT INCLUDING INFORMATION TECHNOLOGY, ELECTRONIC INFORMATION, SOFTWARE, SYSTEMS AND EQUIPMENT, DEVELOPED OR PROVIDED UNDER ANY CONTRACT, IT WILL COMPLY WITH THE APPLICABLE REQUIREMENTS OF THE ILLINOIS INFORMATION TECHNOLOGY ACCESSIBILITY ACT STANDARDS. 30 ILCS 587 Yes 23. VENDOR CERTIFIES THAT IF IT OWNS RESIDENTIAL BUILDINGS, THAT ANY VIOLATION OF THE LEAD POISONING PREVENTION po ACT HAS BEEN MITIGATED. 410 ILCS 45 Yes 24. VENDOR CERTIFIES IT HAS NOT BEEN CONVICTED OF THE OFFENSE OF BID RIGGING OR BID ROTATING OR ANY SIMILAR 'n OFFENSE OF ANY STATE OR OF THE UNITED STATES. 720 ILCS 5/33 E-3, E-4, E-11 Yes 25. VENDOR CERTIFIES IT COMPLIES WITH THE ILLINOIS DEPARTMENT OF HUMAN RIGHTS ACT AND RULES APPLICABLE TO PUBLIC 🃜 CONTRACTS, WHICH INCLUDE PROVIDING EQUAL EMPLOYMENT OPPORTUNITY, REFRAINING FROM UNLAWFUL DISCRIMINATION, AND HAVING WRITTEN SEXUAL HARASSMENT POLICIES. 775 ILCS 5/2-105 Yes 26. VENDOR CERTIFIES IT DOES NOT PAY DUES TO OR REIMBURSE OR SUBSIDIZE PAYMENTS BY ITS EMPLOYEES FOR ANY DUES OR FEES TO ANY "DISCRIMINATORY CLUB." 775 ILCS 25/2 Yes 27. VENDOR WARRANTS AND CERTIFIES THAT IT AND, TO THE BEST OF ITS KNOWLEDGE, ITS SUBCONTRACTORS HAVE AND WILL COMPLY WITH EXECUTIVE ORDER NO. 1 (2007). THE ORDER GENERALLY PROHIBITS VENDORS AND SUBCONTRACTORS FROM HIRING THE THEN-SERVING GOVERNOR'S FAMILY MEMBERS TO LOBBY PROCUREMENT ACTIVITIES OF THE STATE, OR ANY OTHER GOVERNMENT IN ILLINOIS INCLUDING LOCAL GOVERNMENTS IF THAT PROCUREMENT MAY RESULT IN A CONTRACT VALUED AT OVER \$25,000. THIS PROHIBITION ALSO APPLIES TO HIRING FOR THAT SAME PURPOSE ANY FORMER STATE EMPLOYEE WHOSE PROCUREMENT AUTHORITY AT ANY TIME DURING THE ONE-YEAR PERIOD PRECEDING THE PROCUREMENT LOBBYING ACTIVITY. Yes 28. VENDOR CERTIFIES THAT IT HAS READ, UNDERSTANDS AND IS IN COMPLIANCE WITH THE REGISTRATION REQUIREMENTS OF THE ILLINOIS ELECTIONS CODE (10 ILCS 5/9-35) AND THE RESTRICTIONS ON MAKING POLITICAL CONTRIBUTIONS AND RELATED REQUIREMENTS OF THE ILLINOIS PROCUREMENT CODE. 30 ILCS 500/20-160 AND 50-37 VENDOR WILL NOT MAKE A POLITICAL

CONTRIBUTION THAT WILL VIOLATE THESE REQUIREMENTS.

Yes

29. THIS APPLIES TO INDIVIDUALS, SOLE PROPRIETORSHIPS, GENERAL PARTNERSHIPS, AND SINGLE MEMBER LLCS, BUT IS NOT OTHERWISE APPLICABLE. VENDOR CERTIFIES THAT HE/SHE HAS NOT RECEIVED AN EARLY RETIREMENT INCENTIVE PRIOR TO 1993 UNDER SECTION 14-108.3 OR 16-133.3 OF THE ILLINOIS PENSION CODE OR AN EARLY RETIREMENT INCENTIVE ON OR AFTER 2002 UNDER SECTION 14-108.3 OR 16-133.3 OF THE ILLINOIS PENSION CODE. (30 ILCS 105/15A; 40 ILCS 5/14-108.3; 40 ILCS 5/16-133

1

N/A

G. Board of Elections (BOE)

1. IS YOUR BUSINESS REGISTERED WITH THE BOARD OF ELECTIONS (BOE)?

'n

Yes, I certify my business is registered with BOE.

14504

Additional Information

STAFF ATTACHED FILE(S)

Siebert Williams Shank & Co., LLC

| Vendor Registration | |
|---------------------|---|
| FORM NAME | H. Iran Disclosure |
| DESCRIPTION | Complete section H, in order to submit this form. |
| DATE SUBMITTED | 4/13/2020 |
| STATUS | Accepted |
| BUSINESS NAME | Siebert Williams Shank & Co., LLC |
| POINT OF CONTACT | Melissa Little |
| FLAG FORM | |

H. Iran Disclosure

1. DO YOU OR ANY OF YOUR CORPORATE PARENTS OR SUBSIDIARIES HAVE ANY BUSINESS OPERATIONS THAT MUST BE DISCLOSED?

P

No business operations to disclose.

Additional Information

STAFF ATTACHED FILE(S)

I. Financial Disclosure & Conflicts of Interest

Siebert Williams Shank & Co., LLC

| endor Registration | |
|--------------------|--|
| FORM NAME | I. Financial Disclosure & Conflicts of Interest |
| DESCRIPTION | Complete the Financial Disclosure & Conflicts of Interest form |
| DATE SUBMITTED | 4/13/2020 |
| STATUS | Accepted |
| BUSINESS NAME | Siebert Williams Shank & Co., LLC |
| POINT OF CONTACT | Melissa Little |
| FLAG FORM | |

| IDENTIF | THE APPLICABLE ENTITY TYPE. | |
|--|--|---|
| | er Privately Held Entity (i.e. LLC, partnership, privately held corporation with er entity type not clearly identified in another option) | 100 or fewer shareholders, or |
| . IS THERI | A PARENT ENTITY THAT OWNS 100% OF THE BUSINESS? | |
| Yes | | |
| | Document | Status |
| | Parent Form Financial Disclosures and Conflicts of Interest - SWC signed.pdf (PDF, 1.13 MB) | Attached by Melissa Little on 4/13/2020 |
| . INSTRUI | MENT OF OWNERSHIP OR BENEFICIAL INTEREST | |
| | ted Liability Company Membership Agreement (Series LLC, Low-Profit Limited | l Liability Partnershin) |
| Lim | ted Liability Company Membership Agreement (Series LLC, LOW-Front Limited | a Liability i artifership, |
| . IS THERE | ANY INDIVIDUAL OR ENTITY WHO MEETS ANY OF THE FOLLOWING THRESHOLDS: (B) HOLDS OWNERSHIP SHARE OF THE BUSINESS VALUED IN EXCESS OF \$106,447.20 BUSINESS' DISTRIBUTIVE INCOME, OR (D) IS ENTITLED TO MORE THAN \$106,447.20 | (A) OWNS MORE THAN 5% OF THE 20, (C) IS ENTITLED TO MORE THAN |
| . IS THERE BUSINESS, 6% OF THE NCOME? | ANY INDIVIDUAL OR ENTITY WHO MEETS ANY OF THE FOLLOWING THRESHOLDS: (B) HOLDS OWNERSHIP SHARE OF THE BUSINESS VALUED IN EXCESS OF \$106,447.2 | (A) OWNS MORE THAN 5% OF THE 20, (C) IS ENTITLED TO MORE THAN O OF THE BUSINESS' DISTRIBUTIVE |
| . IS THERE BUSINESS, % OF THE NCOME? Yes, | ANY INDIVIDUAL OR ENTITY WHO MEETS ANY OF THE FOLLOWING THRESHOLDS: (B) HOLDS OWNERSHIP SHARE OF THE BUSINESS VALUED IN EXCESS OF \$106,447.20 BUSINESS' DISTRIBUTIVE INCOME, OR (D) IS ENTITLED TO MORE THAN \$106,447.20 | (A) OWNS MORE THAN 5% OF THE 20, (C) IS ENTITLED TO MORE THAN O OF THE BUSINESS' DISTRIBUTIVE |

| Yes | |
|---|----------|
| 3. PLEASE CERTIFY THAT THE FOLLOWING STATEMENT IS TRUE: ALL INDIVIDUALS OR ENTITIES THAT WERE ENTITLED TO RECEIVE DISTRIBUTIVE INCOME IN AN AMOUNT GREATER THAN \$106,447.20 OR GREATER THAN 5% OF THE TOTAL DISTRIBUTIVE INCOME OF THE BUSINESS HAVE BEEN DISCLOSED IN QUESTION 1. | P |
| Yes | |
| 4. DISCLOSURE OF BOARD OF DIRECTORS FOR NOT-FOR-PROFIT ENTITIES. | þ |
| Not applicable - For-Profit Entity | |
| 5. FOR THE INDIVIDUALS DISCLOSED ABOVE IN QUESTION 1 AND FOR SOLE PROPRIETORS, ARE ANY OF THEM A PERSON WHO HOLDS AN ELECTIVE OFFICE IN THE STATE OF ILLINOIS OR HOLDS A SEAT IN THE GENERAL ASSEMBLY, OR ARE THEY THE SPOUSE OR MINOR CHILD OF SUCH PERSON? | þ |
| No | |
| 6. FOR THE INDIVIDUALS DISCLOSED ABOVE IN QUESTION 1 AND FOR SOLE PROPRIETORS, ARE ANY OF THEM APPOINTED TO OR EMPLOYED IN ANY OFFICES OR AGENCIES OF STATE GOVERNMENT AND RECEIVE COMPENSATION FOR SUCH EMPLOYMENT IN EXCESS OF 60% (\$106,447.20) OF THE SALARY OF THE GOVERNOR, OR ARE ANY OF THEM THE SPOUSE OR MINOR CHILD OF SUCH PERSON? | Yau Yau |
| No | |
| 7. FOR THE INDIVIDUALS DISCLOSED ABOVE IN QUESTION 1 AND FOR SOLE PROPRIETORS, ARE ANY OF THEM AN OFFICER OR EMPLOYEE OF THE CAPITAL DEVELOPMENT BOARD OR THE ILLINOIS TOLL HIGHWAY AUTHORITY, OR ARE ANY OF THEM THE SPOUSE OR MINOR CHILD OF SUCH PERSON? | þ |
| No | |
| 8. FOR THE INDIVIDUALS DISCLOSED ABOVE IN QUESTION 1 AND FOR SOLE PROPRIETORS, ARE ANY OF THEM APPOINTED AS A MEMBER OF A BOARD, COMMISSION, AUTHORITY, OR TASK FORCE AUTHORIZED OR CREATED BY STATE LAW OR BY EXECUTIVE ORDER OF THE GOVERNOR, OR ARE THEY THE SPOUSE OR AN IMMEDIATE FAMILY MEMBER WHO CURRENTLY RESIDES OR RESIDED WITH SUCH PERSON WITHIN THE LAST 12 MONTHS? | 'n |
| No | |
| 9. IF ANY QUESTION IN 5-8 ABOVE IS ANSWERED YES, PLEASE ANSWER THE FOLLOWING: DO ANY OF THE INDIVIDUALS IDENTIFIED, THEIR SPOUSE, OR MINOR CHILD RECEIVE FROM THE ENTITY MORE THAN 7.5% OF THE ENTITY'S TOTAL DISTRIBUTABLE INCOME OR AN AMOUNT OF DISTRIBUTABLE INCOME IN EXCESS OF THE SALARY OF THE GOVERNOR (\$177,412.00)? | 'n |
| No | |
| 10. IF ANY QUESTION IN 5-8 ABOVE IS ANSWERED YES, PLEASE ANSWER THE FOLLOWING: IS THERE A COMBINED INTEREST OF ANY INDIVIDUAL IDENTIFIED ALONG WITH THEIR SPOUSE OR MINOR CHILD OF MORE THAN 15% IN THE AGGREGATE OF THE ENTITY'S DISTRIBUTABLE INCOME OR AN AMOUNT OF DISTRIBUTABLE INCOME IN EXCESS OF TWO TIMES THE SALARY OF THE GOVERNOR (\$354,824.00)? | ju ju |
| No | |
| 11. FOR THE INDIVIDUALS DISCLOSED ABOVE IN QUESTION 1 AND FOR SOLE PROPRIETORS, DO ANY OF THEM CURRENTLY HAVE, OR IN THE PREVIOUS 3 YEARS HAD STATE EMPLOYMENT, INCLUDING CONTRACTUAL EMPLOYMENT OF SERVICES? THIS DOES NOT INCLUDE CONTRACTS TO PROVIDE GOODS OR SERVICES TO THE STATE AS A VENDOR. | þ |
| No | |
| 12. FOR THE INDIVIDUALS DISCLOSED ABOVE IN QUESTION 1 AND FOR SOLE PROPRIETORS, HAVE THEIR SPOUSE, FATHER, MOTHER, SON, OR DAUGHTER, HAD STATE EMPLOYMENT, INCLUDING CONTRACTUAL EMPLOYMENT FOR SERVICES, IN THE PREVIOUS 2 YEARS? THIS DOES NOT INCLUDE CONTRACTS TO PROVIDE GOODS OR SERVICES TO THE STATE AS A VENDOR. | 'n |
| No | |

| 13. FOR THE INDIVIDUALS DISCLOSED ABOVE IN QUESTION 1 AND FOR SOLE PROPRIETORS, DO ANY OF THEM CURRENTLY HOLD OR HAVE HELD IN THE PREVIOUS 3 YEARS ELECTIVE OFFICE OF THE STATE OF ILLINOIS, THE GOVERNMENT OF THE UNITED STATES, OR ANY UNIT OF LOCAL GOVERNMENT AUTHORIZED BY THE CONSTITUTION OF THE STATE OF ILLINOIS OR THE STATUTES OF THE STATE OF ILLINOIS? | jau |
|--|-----|
| No | |
| 14. FOR THE INDIVIDUALS DISCLOSED ABOVE IN QUESTION 1 AND FOR SOLE PROPRIETORS, DO ANY OF THEM HAVE A RELATIONSHIP TO ANYONE (SPOUSE, FATHER, MOTHER, SON, OR DAUGHTER) HOLDING ELECTIVE OFFICE CURRENTLY OR IN THE PREVIOUS 2 YEARS? | 'nω |
| No | |
| 15. FOR THE INDIVIDUALS DISCLOSED ABOVE IN QUESTION 1 AND FOR SOLE PROPRIETORS, DO ANY OF THEM HOLD OR HAVE HELD IN THE PREVIOUS 3 YEARS ANY APPOINTIVE GOVERNMENT OFFICE OF THE STATE OF ILLINOIS, THE UNITED STATES OF AMERICA, OR ANY UNIT OF LOCAL GOVERNMENT AUTHORIZED BY THE CONSTITUTION OF THE STATE OF ILLINOIS OR THE STATUTES OF THE STATE OF ILLINOIS, WHICH OFFICE ENTITLES THE HOLDER TO COMPENSATION IN EXCESS OF EXPENSES INCURRED IN THE DISCHARGE OF THAT? | jau |
| No | |
| 16. FOR THE INDIVIDUALS DISCLOSED ABOVE IN QUESTION 1 AND FOR SOLE PROPRIETORS, DO ANY OF THEM HAVE A RELATIONSHIP TO ANYONE (SPOUSE, FATHER, MOTHER, SON, OR DAUGHTER) HOLDING APPOINTIVE OFFICE CURRENTLY OR IN THE PREVIOUS 2 YEARS? | jw |
| No | |
| 17. FOR THE INDIVIDUALS DISCLOSED ABOVE IN QUESTION 1 AND FOR SOLE PROPRIETORS, DO ANY OF THEM CURRENTLY HAVE OR IN THE PREVIOUS 3 YEARS HAD EMPLOYMENT AS OR BY ANY REGISTERED LOBBYIST OF THE STATE GOVERNMENT? | P |
| No | |
| 18. FOR THE INDIVIDUALS DISCLOSED ABOVE IN QUESTION 1 AND FOR SOLE PROPRIETORS, DO ANY OF THEM CURRENTLY HAVE OR IN THE PREVIOUS 2 YEARS HAD A RELATIONSHIP TO ANYONE (SPOUSE, FATHER, MOTHER, SON, OR DAUGHTER) THAT IS OR WAS A REGISTERED LOBBYIST? | jw |
| No | |
| 19. FOR THE INDIVIDUALS DISCLOSED ABOVE IN QUESTION 1 AND FOR SOLE PROPRIETORS, DO ANY OF THEM CURRENTLY HAVE OR IN THE PREVIOUS 3 YEARS HAD COMPENSATED EMPLOYMENT BY ANY REGISTERED ELECTION OR RE-ELECTION COMMITTEE REGISTERED WITH THE SECRETARY OF STATE OR ANY COUNTY CLERK IN THE STATE OF ILLINOIS, OR ANY POLITICAL ACTION COMMITTEE REGISTERED WITH EITHER THE SECRETARY OF STATE OR THE FEDERAL BOARD OF ELECTIONS? | jw |
| No | |
| 20. FOR THE INDIVIDUALS DISCLOSED ABOVE IN QUESTION 1 AND FOR SOLE PROPRIETORS, DO ANY OF THEM CURRENTLY HAVE OR IN THE PREVIOUS 2 YEARS HAD A RELATIONSHIP TO ANYONE (SPOUSE, FATHER, MOTHER, SON, OR DAUGHTER) WHO IS OR WAS A COMPENSATED EMPLOYEE OF ANY REGISTERED ELECTION OR REELECTION COMMITTEE REGISTERED WITH THE SECRETARY OF STATE OR ANY COUNTY CLERK IN THE STATE OF ILLINOIS, OR ANY POLITICAL ACTION COMMITTEE REGISTERED WITH EITHER THE SECRETARY OF STATE OR THE FEDERAL BOARD OF ELECTIONS? | jau |
| No | |
| 21. HAS THERE BEEN ANY DEBARMENT FROM CONTRACTING WITH ANY GOVERNMENTAL ENTITY WITHIN THE PREVIOUS TEN YEARS? THIS APPLIES TO ALL SOLE PROPRIETORS, FOR-PROFIT ENTITIES, NOT-FOR-PROFIT ENTITIES, AND FOR THE INDIVIDUALS DISCLOSED IN QUESTION 1 ABOVE. | Po |
| No | |
| 22. HAS THERE BEEN ANY PROFESSIONAL LICENSURE DISCIPLINE WITHIN THE PREVIOUS TEN YEARS? THIS APPLIES TO ALL SOLE PROPRIETORS, FOR-PROFIT ENTITIES, NOT-FOR-PROFIT ENTITIES, AND FOR THE INDIVIDUALS DISCLOSED IN QUESTION 1 ABOVE. | jw |
| No | |

| 23. HAS THERE BEEN ANY BANKRUPTCY WITHIN THE PREVIOUS TEN YEARS? THIS APPLIES TO ALL SOLE PROPRIETORS, FOR-PROFIT ENTITIES, NOT-FOR-PROFIT ENTITIES, AND FOR THE INDIVIDUALS DISCLOSED IN QUESTION 1 ABOVE. | | | | | | |
|--|----|--|--|--|--|--|
| No | | | | | | |
| 24. HAVE THERE BEEN ANY ADVERSE CIVIL JUDGMENTS AND/OR ADMINISTRATIVE FINDINGS WITHIN THE PREVIOUS TEN YEARS? THIS APPLIES TO ALL SOLE PROPRIETORS, FOR-PROFIT ENTITIES, NOT-FOR-PROFIT ENTITIES, AND FOR THE INDIVIDUALS DISCLOSED IN QUESTION 1 ABOVE. | jw | | | | | |
| No | | | | | | |
| 25. HAVE THERE BEEN ANY CRIMINAL FELONY CONVICTIONS WITHIN THE PREVIOUS TEN YEARS? THIS APPLIES TO ALL SOLE PROPRIETORS, FOR-PROFIT ENTITIES, NOT-FOR-PROFIT ENTITIES, AND FOR THE INDIVIDUALS DISCLOSED IN QUESTION 1 ABOVE. | Po | | | | | |
| No | | | | | | |

Additional Information

STAFF ATTACHED FILE(S)

THA - Toll Highway Authority

Purchase Order

Purchase Order Number

21-557THA-FINAN-P-20671

Master Contract? N Contract/Ob #:

| | Vendor Number: V00001959 |
|----|----------------------------------|
| ٧ | Siebert Williams Shank & Co LLC |
| ĮΕ | 111 East Wacker Drive Suite 2605 |
| Ν | Chicago, IL 60601 |
| lD | rortega@siebertwilliams.com |
| Ю | (312) 759-0400 |
| IR | |
| 1 | |

VENDOR INSTRUCTIONS:

PURCHASE ORDER REQUIREMENTS - STATE OF ILLINOIS AGENCIES

Prior to commencement of billable work, delivery of supplies or rendering of any service on a Purchase Order:

- -Initial Purchase Order/Contract All parties, including the State and vendor, must fully execute the contract in its entirety.
- —Release from an existing Purchase Order/Contract The vendor must receive a Purchase Order signed by the State Agency and attached in BidBuy. Note, for any additional requirements see specific State Agency instruction.

PURCHASE ORDERS REQUIREMENTS - OTHER PURCHASING ENTITIES --Please see specific requirements provided by the purchasing entity.

| SH-P FO | Ship To - CA 2700 Ogden Avenue Central Administration Downers Grove, IL 60515 US Email: (630) 241-6800 |
|---------|--|
| B I L L | Contract Administrator PO Box 3094 Lisle, IL 60532-8094 US Email: ProInvoices@getipass.com (630) 241-6800 |
| T O | |

Shipping Method:

Shipping Terms:
Shipping Terms:
Solicitation (Bid) No.: N/A
Contract Begin Date: 03/15/2018

Contract End Date: 10/14/2021

Freight Terms:
Payment Terms:
Delivery Calendar Day(s) A.R.O.: 0

Item # 1

Class-Item 946-30

Legacy contract for 16-0155L for Bond Underwriting Services for the term of two (2) years.

| Quantity | Unit Price | UOM | Discount % | Total Discount | Tax Rate | Tax Amount | Freight | Total Cost |
|----------|---------------|-----|------------|----------------|----------|------------|---------|---------------|
| 1.00 | \$ 200,000.00 | EA | 0.00 % | \$ 0.00 | | \$ 0.00 | \$ 0.00 | \$ 200,000.00 |

Item # 2 Class-Item 946-30

Renew contract 16-0155L for Bond underwriting Services for a period of one year.

| Quantity | Unit Price | UOM | Discount % | Total Discount | Tax Rate | Tax Amount | Freight | Total Cost |
|----------|---------------|-----|------------|----------------|----------|------------|---------|---------------|
| 1.00 | \$ 468,000.00 | EA | 0.00 % | \$ 0.00 | | \$ 0.00 | \$ 0.00 | \$ 468,000.00 |

Page 2 of 3 21-557THA-FINAN-P-20671

TAX: \$ 0.00

FREIGHT: \$ 0.00

TOTAL: \$ 668,000.00

The undersigned agree to the Terms and Conditions as acknowledged by the Vendor and maintained in the State of Illinois' e-procurement system. This agreement consists of all terms as maintained in the state's e-procurement system inclusive of attached documents. The Vendor affirms that the Certifications and Financial Disclosures and Conflicts of Interest are true and accurate as of the date of the Vendor's execution of this Agreement. State documents will prevail in the event of a conflict between State and Vendor documents and information. The undersigned agree to the Terms and Conditions of this agreement:

OFFICIAL SIGNATURES:

| Vendor Name: | | - |
|---|----------------------------|---------------------|
| Vendor Signature: | | |
| | | |
| Title: | | |
| Phone #: | | |
| Email: | | - |
| Date: | | |
| State of Illinois Agency or Other Purchasing Entity Procuring State Agency or Entity: | | Illinois State Toll |
| Official Signature | | , |
| Printed Name: | José R. Alvarez | |
| Title: | Executive Director | |
| Designee Signature | e: | |
| Printed Name: | Eric Occomy | |
| Title: | Chief of Contract Services | |
| Date: | 10/15/2020 | - |
| Legal Signature: | | |
| Printed Name: | | |
| Title: | | |
| Date: | | |
| Fiscal Signature: | | |
| Printed Name: | | |
| Title: | | |
| Date: | | |
| FOR STATE OF ILLINOIS USE ONLY: | | |
| Acq. Type: | Source Sel. Method: _ | |
| Using Agency Funding Source: Detailed Expenditure Object Code: | | |
| Approp. Acct Code: | | |
| Award Code:Original Proc. Method: | | |
| Subcontractors Disclosed: | | |
| Subcontractors Utilized: | | |
| Publication Date: Financing Needed: Publication Date: Financing Needed: No. | | |

APPROVED

By: Desiree Liberti
Phone#: (630) 241-6800
BUYER

Signature:

Eric Occomy (Oct 15, 2020 18:38 CDT)

Email: EOccomy@getipass.com