

## RESOLUTION NO. 21937

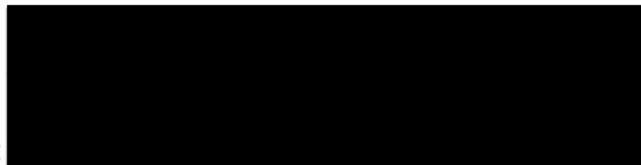
**Background**

The Illinois State Toll Highway Authority (“Tollway”) has previously purchased Aluminum Extrusions from MDSolutions Inc. (“Contract No. 17-0136”). It is in the best interest of the Tollway to exercise the renewal option of Contract No. 17-0136 and increase the upper limit of compensation to MDSolutions Inc. by an amount not to exceed \$500,000.00 for the purchase of additional Aluminum Extrusions.

**Resolution**

The renewal option and associated increase to the upper limit of compensation of Contract No. 17-0136 for the purchase of additional Aluminum Extrusions from MDSolutions Inc. is approved in an amount not to exceed \$500,000.00 (increase from \$670,131.05 to \$1,170,131.05). As may be necessary, the Chairman/Chief Executive Officer of the Tollway is authorized to execute the appropriate documents in connection therewith, subject to the approval of the General Counsel and the Chief Financial Officer. The Chief of Procurement is authorized to issue the necessary purchase orders and contract purchase orders and any other necessary documents in connection therewith, and the Chief Financial Officer is authorized to issue warrants in payment thereof.

Approved by:

A large black rectangular redaction box covering the signature of the Chairman.

Chairman

# STATE OF ILLINOIS CONTRACT RENEWAL

Illinois Tollway  
Aluminum Extrusions  
17-0136

Contract Renewal

1  2  3  4  5

The undersigned Agency and Vendor, MD Solutions, Inc., (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: MD Solutions, Inc.  | Address: 8225 Estates PKWY, Plain City, OH 43064 |
| Signature:                       | Phone: 614-873-2222                              |
| Printed Name: - <i>Neil Louy</i> | Fax: 614-873-2220                                |
| Title: - <i>Sales</i>            | Email: neil@md-signs.com                         |
| Date: <i>1-21-20</i>             |  |

**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:                                | Date:                     |
| Printed Name: Willard S. Evans, Jr.                |                           |
| Official's Title: Chairman/Chief Executive Officer |                           |
| Official Signature:                                | Date: <i>Feb 27, 2020</i> |
| Printed Name: José R. Alvarez                      | <i>25/2020</i>            |
| Official's Title: Executive Director               |                           |
| Approved as to Form and Constitutionality          |                           |
| Legal Signature:                                   | Date: <i>2-21-2020</i>    |
| Legal Printed Name: <i>Robert T. Lane</i>          |                           |
| Legal's Title: Attorney General, State of Illinois |                           |
| Finance Signature:                                 | Date: <i>2-24-20</i>      |
| Finance Printed Name: Michael J. Colsch            |                           |

|  |                 |
|--|-----------------|
| Finance's Title: Chief Financial Officer (CFO) |                 |
| Legal Signature: [REDACTED]                    | Date: 2/21/2020 |
| Legal Printed Name: Kathleen Pasulka-Brown     |                 |
| Legal's Title: General Counsel                 |                 |
| Procurement Signature: [REDACTED]              | Date: 2/24/20   |
| Procurement Printed Name: John Donato          |                 |
| Procurement's Title: Chief of Procurement      |                 |

STATE USE ONLY

NOT PART OF CONTRACTUAL PROVISIONS

PBC# R-42720

Project Title: Aluminum Extrusions

Contract # 17-0136

Procurement Method (IFB, RFP, Small, etc): IFB

IPB Ref. # 22041057

IPB Publication Date: Award Code: A

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): 17-0136 Alum Extrusions.
2. **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 February 29, 2020 and shall run through February 28, 2021.
4. **COSTS** (describe calculation and/or cost basis, if applicable): The value of this renewal contract is \$499,993.42. 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 approved per Amendment executed on 3/14/2019 in the amount of \$6.74 per Linear Feet for all 12" wide, Type B Aluminum Extrusions.

| Description                          | Unit of Measure | Estimated Quantities | Price  | Extended Total |
|--------------------------------------|-----------------|----------------------|--------|----------------|
| 12" wide, Type B Aluminum Extrusions | Liner feet      | 74,183               | \$6.74 | \$499,993.42   |

5. **MAXIMUM AMOUNT:** Vendor's compensation for (services) under this renewal Contract shall not exceed \$599,992.10 during this renewal term without a formal amendment.

6. **SUBCONTRACTORS:** Will subcontractors be utilized?  Yes  No

- Subcontractor Name: -

Amount to be paid: -

Address: -

Description of work: -

- Subcontractor Name: -

Amount to be paid: -

Address: -

Description of work: -

- 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 STANDARD CERTIFICATIONS

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Vendor acknowledges and agrees that compliance with this subsection in its entirety for the term of the contract and any renewals is a material requirement and condition of this contract. By executing this contract Vendor certifies compliance with this subsection in its entirety, and is under a continuing obligation to remain in compliance and report any non-compliance.

This subsection, in its entirety, applies to subcontractors used on this contract. Vendor shall include these Standard Certifications in any subcontract used in the performance of the contract using the Standard Certification form provided by the State.

If this contract extends over multiple fiscal years, including the initial term and all renewals, Vendor and its subcontractors shall confirm compliance with this section in the manner and format determined by the State by the date specified by the State and in no event later than July 1 of each year that this contract remains in effect.

If the Parties determine that any certification in this section is not applicable to this contract it may be stricken without affecting the remaining subsections.

**7.1.** As part of each certification, Vendor acknowledges and agrees that should Vendor or its subcontractors provide false information, or fail to be or remain in compliance with the Standard Certification requirements, one or more of the following sanctions will apply:

- the contract may be void by operation of law,
- the State may void the contract, and
- the Vendor and its subcontractors may be subject to one or more of the following: suspension, debarment, denial of payment, civil fine, or criminal penalty.

Identifying a sanction or failing to identify a sanction in relation to any of the specific certifications does not waive imposition of other sanctions or preclude application of sanctions not specifically identified.

**7.2.** Vendor certifies it and its employees will comply with applicable provisions of the United States Civil Rights Act, Section 504 of the Federal Rehabilitation Act, the Americans with Disabilities Act, and applicable rules in performance of this contract.

**7.3.** Vendor, if an individual, sole proprietor, partner or an individual as member of a LLC, certifies he/she is not in default on an educational loan. 5 ILCS 385/3.

**7.4.** Vendor, if an individual, sole proprietor, partner or an individual as member of a LLC, certifies it he/she has not received (i) an early retirement incentive prior to 1993 under Section 14-108.3 or 16-133.3 of the Illinois Pension Code or (ii) 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.

**7.5.** Vendor certifies that it is a legal entity authorized to do business in Illinois prior to submission of a bid, offer, or proposal. 30 ILCS 500/1-15.80, 20-43.

## STATE OF ILLINOIS STANDARD CERTIFICATIONS

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- 7.6. To the extent there was a current Vendor providing the services covered by this contract and the employees of that Vendor who provided those services are covered by a collective bargaining agreement, Vendor certifies (i) that it will offer to assume the collective bargaining obligations of the prior employer, including any existing collective bargaining agreement with the bargaining representative of any existing collective bargaining unit or units performing substantially similar work to the services covered by the contract subject to its bid or offer; and (ii) that it shall offer employment to all employees currently employed in any existing bargaining unit who perform substantially similar work to the work that will be performed pursuant to this contract. This does not apply to heating, air conditioning, plumbing and electrical service contracts. 30 ILCS 500/25-80.
- 7.7. Vendor certifies it has neither been convicted of bribing or attempting to bribe an officer or employee of the State of Illinois or any other State, nor made an admission of guilt of such conduct that is a matter of record. 30 ILCS 500/50-5.
- 7.8. If Vendor has been convicted of a felony, Vendor certifies at least five years have passed after the date of completion of the sentence for such felony, unless no person held responsible by a prosecutor's office for the facts upon which the conviction was based continues to have any involvement with the business. 30 ILCS 500/50-10.
- 7.9. If Vendor or any officer, director, partner, or other managerial agent of Vendor has been convicted of a felony under the Sarbanes-Oxley Act of 2002, or a Class 3 or Class 2 felony under the Illinois Securities Law of 1953, Vendor certifies at least five years have passed since the date of the conviction. Vendor further certifies that it is not barred from being awarded a contract and acknowledges that the State shall declare the contract void if this certification is false. 30 ILCS 500/50-10.5.
- 7.10. 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), *amended by Pub. Act No. 97-0895 (August 3, 2012)*.
- 7.11. Vendor certifies that it and its affiliates are not delinquent in the payment of any debt to the State (or if delinquent has entered into a deferred payment plan to pay the debt), and Vendor and its affiliates acknowledge the State may declare the contract void if this certification is false or if Vendor or an affiliate later becomes delinquent and has not entered into a deferred payment plan to pay off the debt. 30 ILCS 500/50-11, 50-60.
- 7.12. 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 and acknowledges that failure to comply may result in the contract being declared void. 30 ILCS 500/50-12.
- 7.13. 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 not barred from being awarded a contract. 30 ILCS 500/50-14.
- 7.14. 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 same, for not bidding on a State contract. 30 ILCS 500/50-25.

## STATE OF ILLINOIS STANDARD CERTIFICATIONS

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- 7.15. Vendor certifies it is not in violation of the “Revolving Door” provisions of the Illinois Procurement Code. 30 ILCS 500/50-30.
- 7.16. Vendor certifies that it has not retained 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. 30 ILCS 500/50-38.
- 7.17. Vendor certifies that if it has hired a person required to register under the Lobbyist Registration Act to assist in obtaining any State contract, that none of the lobbyist’s costs, fees, compensation, reimbursements, or other remuneration were billed to the State. 30 ILCS 500/50-38.
- 7.18. Vendor certifies it will report to the Illinois Attorney General and the Chief Procurement Officer any suspected 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.
- 7.19. Vendor certifies steel products used or supplied in the performance of a contract for public works shall be manufactured or produced in the United States, unless the executive head of the procuring Agency grants an exception. 30 ILCS 565.
- 7.20. Drug Free Workplace
- 7.20.1 If Vendor employs 25 or more employees and this contract is worth more than \$5,000, Vendor certifies it will provide a drug free workplace pursuant to the Drug Free Workplace Act.
- 7.20.2 If Vendor is an individual and this contract is worth more than \$5000, 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. 30 ILCS 580.
- 7.21. Vendor certifies that neither Vendor nor any substantially owned affiliate is participating or shall 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.
- 7.22. Vendor certifies it has not been convicted of the offense of bid rigging or bid rotating or any similar offense of any state or of the United States. 720 ILCS 5/33 E-3, E-4.
- 7.23. 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.
- 7.24. 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.
- 7.25. Vendor certifies that no foreign-made equipment, materials, or supplies furnished to the State under the contract have been or will be produced in whole or in part by forced labor or indentured labor under penal sanction. 30 ILCS 583.
- 7.26. Vendor certifies that no foreign-made equipment, materials, or supplies furnished to the State under the contract have been produced in whole or in part by the labor of any child under the age of 12. 30 ILCS 584.

## STATE OF ILLINOIS STANDARD CERTIFICATIONS

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- 7.27. Vendor certifies that any violation of the Lead Poisoning Prevention Act, as it applies to owners of residential buildings, has been mitigated. 410 ILCS 45.
- 7.28. 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 unit of 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 who had procurement authority at any time during the one-year period preceding the procurement lobbying activity.
- 7.29. Vendor certifies that information technology, including electronic information, software, systems and equipment, developed or provided under this contract comply with the applicable requirements of the Illinois Information Technology Accessibility Act Standards as published at ([www.dhs.state.il.us/iitaa](http://www.dhs.state.il.us/iitaa)) 30 ILCS 587.
- 7.30. Vendor certifies that it has read, understands, and is in compliance with the registration requirements of the 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.

In accordance with section 20-160 of the Illinois Procurement Code, Vendor certifies as applicable:

Vendor is not required to register as a business entity with the State Board of Elections.

or

Vendor has registered with the State Board of Elections. As a registered business entity, Vendor acknowledges a continuing duty to update the registration as required by the Act.

- 7.31. 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 subcontract that are manufactured in the United States. 30 ILCS 517.
- 7.32. For contracts other than construction contracts subject to the requirements of 30 ILCS 500/30-20 and 30 ILCS 500/33-10, a person (other than an individual acting as a sole proprietor) must be a duly constituted legal entity to qualify as a bidder or offeror prior to submitting a bid, offer, or proposal. 30 ILCS 500/20-43. Vendor certifies that it is a legal entity as of the date for submitting this bid, offer, or proposal.
- 7.33. Vendor certifies that, for the duration of this contract it will:
- post its employment vacancies in Illinois and border states on the Department of Employment Security's IllinoisJobLink.com website or its successor system; or
  - will provide an online link to these employment vacancies so that this link is accessible through the IllinoisJobLink.com website or its successor system; or
  - is exempt from 20 ILCS 1005/1005-47 because the contract is for construction-related services as that term is defined in section 1-15.20 of the Procurement Code; or the contract is for construction and vendor is a party to a contract with a bona fide labor organization and performs construction. (20 ILCS 1005/1005-47).

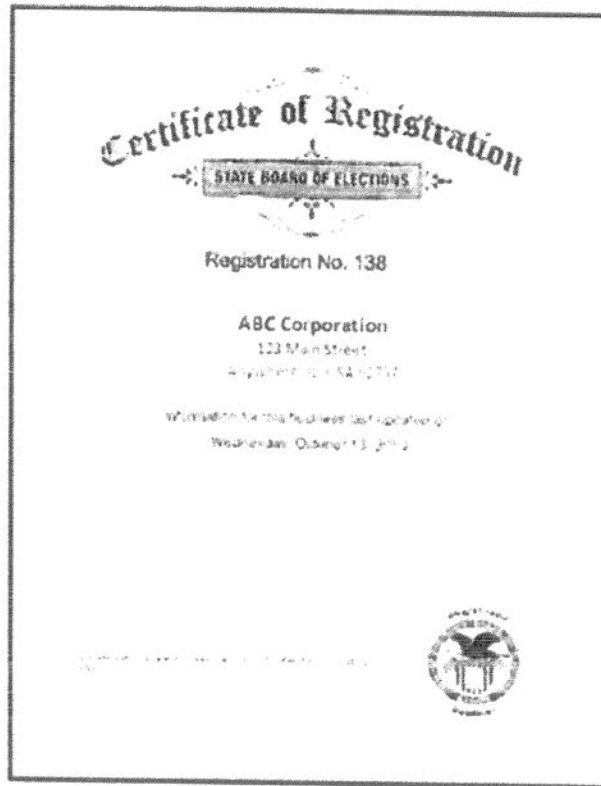
**STATE OF ILLINOIS  
STATE BOARD OF ELECTIONS**

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8. Section 50-37 of the Illinois Procurement Code prohibits political contributions of certain vendors, bidders and offerors. Additionally, section 9-35 of the Illinois Election Code governs provisions relating to reporting and making contributions to state officeholders, declared candidates for State offices and covered political organizations that promote the candidacy of an officeholder or declared candidate for office. The State may declare any resultant contract void if these Acts are violated.

Generally, if a vendor, bidder, or offeror is an entity doing business for profit (i.e. sole proprietorship, partnership, corporation, limited liability company or partnership, or otherwise) and has contracts with State agencies that annually total more than \$50,000 or whose aggregate pending bids or proposals and current State contracts that total more than \$50,000, the vendor, bidder, or offeror is prohibited from making political contributions and must register with the State Board of Elections. 30 ILCS 500/20-160.

**EVIDENCE OF REGISTRATION WITH THE STATE BOARD OF ELECTIONS  
IS THE CERTIFICATE OF REGISTRATION**





STATE OF ILLINOIS BUSINESS ENTERPRISE PROGRAM  
UTILIZATION PLAN

UTILIZATION PLAN PART I: COMMITMENT AND SIGNATURE

The undersigned Vendor submits this Utilization Plan as part of its bid or offer in accordance with the requirements of solicitation # 17-0136 and the requirements of the Business Enterprise Program (BEP). The solicitation contains a goal that 1 % of the value of the contract will be performed by BEP certified vendors as defined by the Department of Central Management Services (CMS).

The Utilization Plan consists of the following parts, each of which must be completed and returned as instructed in this Commitment. No alterations of these forms will be permitted:


- Part I: Vendor Commitment (with Signature)
- Part II: Subcontractor Participation Agreement(s)
- Part III: Good Faith Effort (Checklist, Contact Log, and Documentation)
- Part IV: Utilization Plan Terms and Conditions (These terms and conditions apply to all options below but do not need to be returned).

The undersigned Vendor acknowledges that (1) Vendor has read, understands, and agrees to BEP policies, rules, and procedures as defined in the Terms and Conditions in Part IV of this document, and (2) Vendor hereby affirms (select one of the options below):

- Vendor is a BEP certified firm and plans to fully meet the goal through self-performance. (Return this Part I Signature Page only.)
- Vendor has identified BEP certified subcontractor(s) to fully meet the established goal. (Return this Part I Signature page and signed Part II Subcontractor Participation Agreement(s) to equal or exceed the goal.)
- Vendor cannot fully meet the goal but has made Good Faith Effort towards meeting the goal, and hereby requests a waiver or reduction of the goal to \_\_\_% based on the completed Good Faith Effort. (If requesting a waiver, return this Part I Signature Page and completed Part III Good Faith Effort. If requesting a reduction, return this Part I Signature Page, Part II signed Subcontractor Participation Agreement(s), and completed Part III Good Faith Effort.)

The undersigned Vendor understands that all subcontractors identified in this Utilization Plan and Participation Agreement(s) must be certified with the Illinois Department of Central Management Services (CMS) BEP at the time of submission of all bids/offers and shall perform commercially useful functions as defined in Part IV of this Utilization Plan. **We understand that compliance with this Utilization Plan is a mandated part of this solicitation and that this Utilization Plan will become a part of the contract, if awarded.** Failure to carry out the requirements of this Utilization Plan is a material breach of the resulting contract, which may result in the termination of the contract or such other remedy as the Agency/University deems appropriate.

Vendor Name and d/b/a: MOSolutions

Signature:  Print: Neil Lucy Title: Sales

Email Address: neil@md-sis.org Telephone: 617-823-2222



**STATE OF ILLINOIS**  
**FORMS B CERTIFICATIONS AND DISCLOSURES**

BidBuy Reference #: B-12527 Procurement/Contract #: 17-0136 Aluminum Extrusions

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: 20107430

IPG Expiration Date: 2/25/2020

**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.  Yes  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.

**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                  | Aluminum Extrusions       | Current                   | 250,000                   | 17-0136   |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | 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: MDSolutions

Phone: 614-873-2222

Street Address: 8225 Estates Pkwy

Email: neil@md-signs.com

City, State, Zip: Plain City, OH 43064

Vendor Contact: Neil Louy

Signature 

Date: 1/21/20

Printed Name: Neil Louy

Title: Sales

**STATE OF ILLINOIS  
TAXPAYER IDENTIFICATION NUMBER**

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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: Neil Louy

Business Name: MDSolutions

Taxpayer Identification Number:

Social Security Number: [Click here to enter text.](#)

or

Employer Identification Number: 

Legal Status (check one):

- |   |  |
|---|--|
| <input type="checkbox"/> Individual   | <input type="checkbox"/> Governmental  |
| <input type="checkbox"/> Sole Proprietor  | <input type="checkbox"/> Nonresident alien   |
| <input type="checkbox"/> Partnership  | <input type="checkbox"/> Estate or trust   |
| <input type="checkbox"/> Legal Services Corporation   | <input type="checkbox"/> Pharmacy (Non-Corp.)  |
| <input type="checkbox"/> Tax-exempt   | <input type="checkbox"/> Pharmacy/Funeral Home/Cemetery (Corp.)                              |
| <input type="checkbox"/> Corporation providing or billing<br>medical and/or health care services                | <input type="checkbox"/> Limited Liability Company<br>(select applicable tax classification) |
| <input checked="" type="checkbox"/> Corporation NOT providing or billing<br>medical and/or health care services | <input type="checkbox"/> C = corporation   |
|   | <input type="checkbox"/> P = partnership   |

Signature of Authorized Representative: 

Date: January 21, 2020

## Vendor Registration: View

[General](#)
[Public Profile](#)
[Users](#)
[Commodity Codes](#)
[Contacts & Owners](#)
[Comments](#)
[Certifications](#)
[Site Visits](#)

[Registrations](#)
[Reports](#)

**MDSOLUTIONS INC.**

System Vendor Number: **20107430**

[View All Forms in PDF](#)
[Download Documents](#)

### Vendor Registration

|  |   |
|--|---|
| TYPE   | <b>State of Illinois Vendor Registration</b>              |
| DESCRIPTION                                  | <b>Register to do business with the State of Illinois</b> |
| DATE SUBMITTED                               | <b>2/22/2019</b>  |
| STATUS                                       | <b>Accepted</b>   |
| STATE OF ILLINOIS VENDOR REGISTRATION NUMBER | <b>IPG-0295150</b>  |
| REVIEWER                                     | <b><u>Derek Cima</u></b>                                  |
| DATE REVIEWED                                | <b>2/25/2019</b>  |
| PUBLIC REVIEW COMMENTS                       |   |
| PRIVATE REVIEW COMMENTS                      |   |
| EXPIRATION DATE                              | <b>2/25/2020</b>  |
| FLAG FORM                                    | <b><u>Add Flag</u></b>                                    |

### Settings

|  |                         |
|--|-------------------------|
| SMALL BUSINESS SET-ASIDE PROGRAM (SBSP) REGISTERED | <b>No</b>               |
| REGISTERING AS A                                   | <b>Prime Contractor</b> |

### Entity Information

|                             |  |
|-----------------------------|--|
| BUSINESS NAME               | <b>MDSOLUTIONS INC.</b>                        |
| CONTACT FOR THIS SUBMISSION | <b><u>Sheetal Bajoria (change contact)</u></b> |
| PRIMARY CONTACT EMAIL       | <b><u>govt_sales@md-signs.com</u></b>          |
| PHONE                       | <b>614-873-2222</b>                            |

|               |  |
|---------------|--|
| FAX           |  |
| COMPANY EMAIL | govt_sales@md-signs.com  |
| TAX ID NUMBER | <span style="background-color: black; color: black;">XXXXXXXXXX</span>         |
| COMPANY TYPE  | Corporation  |
| ADDRESS       | 8225 Estates Parkway<br>Plain City, OH 43064<br><a href="#">[edit address]</a> |

[View Vendor Profile](#)

### Current Vendor Certifications

| Type | Effective | Renewal  | Organization                                  |
|------|-----------|----------|---|
| MBE  | 3/2/2017  | 3/2/2020 | State of Illinois Central Management Services |

### Forms

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

### NIGP Codes

|            |  |
|------------|--|
| NIGP 320   | FASTENERS: BOLTS, NUTS, PINS, RIVETS, SCREWS, etc. (INCL, PACKAGING, STRAPPING AND TYING EQUIPMENT AND SUPPLIES) |
| NIGP 32075 | Strapping, Seals, Banding and Tools and Equipment  |
| NIGP 55004 | Beads, Glass, Sign and Stripe  |
| NIGP 55012 | Clamps and Bolts, U-Type, Large, For Highway Signs   |
| NIGP 55045 | Sheeting, Reflectorized, General, (See 801-49 for Reflective Sign Material)                                      |
| NIGP 55085 | Traffic Signal Poles, Standards, and Brackets  |
| NIGP 57044 | Posts, Steel: Delineator Markers, Mile Markers, etc.   |

|            |   |
|------------|---|
| NIGP 57045 | Posts, Metal, Other Than Steel  |
| NIGP 57058 | Sign Blanks, Aluminum   |
| NIGP 801   | Signs, Sign Materials, Sign Making Equipment, and Related Supplies                            |
| NIGP 80100 | SIGNS, SIGN MATERIALS, SIGN MAKING EQUIPMENT, AND RELATED SUPPLIES                            |
| NIGP 80109 | Blanks, Sign, Metal (See 801-71, 89, and 97 for other Sign Blanks)                            |
| NIGP 80112 | Brackets and Holders, Sign  |
| NIGP 80130 | Posts, Standards, Supports, and Expansion Plugs   |
| NIGP 80140 | Sign Faces  |
| NIGP 80150 | Sign Material, Reflective, Die Cut, (See 550-45 for Reflective Sheeting for other than Signs) |
| NIGP 80160 | Signs: Construction, Including Roll-Up Type Message Signs                                     |
| NIGP 80187 | Signs, Overhead, Traffic  |
| NIGP 80196 | Signs, Traffic, Solar Powered, LED, Flashing, Programmable                                    |

### Additional Information

STAFF ATTACHED FILE(S)

[Attach File](#)

| Document  | Status   |
|---|--|
| <a href="#">MDSOLUTIONS INC. 2.25.19 - IPG Application Review Sheet.pdf</a> | PDF, 867.15 KB<br><a href="#">Delete</a><br><a href="#">Edit Info</a><br>Attached by Derek Cima on 2/25/2019 |

[Refresh List](#) after attaching file(s).

### Signature

SIGNATURE                      Sheetal Bajoria  
 TITLE                              President  
 ORGANIZATION                  MDSOLUTIONS INC.  
 SIGNATURE DATE                2/22/2019

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**MDSOLUTIONS INC.**

System Vendor Number: **20107430**

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### Vendor Registration

|                  |   |
|------------------|---|
| FORM NAME        | <b>A - B. Business Information &amp; Additional Information</b> |
| DESCRIPTION      | <b>Complete section A and B, in order to submit this form.</b>  |
| DATE SUBMITTED   | <b>2/22/2019</b>  |
| STATUS           | <b>Accepted</b>   |
| BUSINESS NAME    | <b>MDSOLUTIONS INC.</b>   |
| POINT OF CONTACT | <b><u>Sheetal Bajoria</u></b>                                   |
| FLAG FORM        | <b><u>Add Flag</u></b>  |

### A. Business Information

|   |  |    |
|---|--|----|
| 1. YOUR BUSINESS IS REGISTERING AS A                          | <b>Prime Contractor only- All Forms A-I must be completed.</b> | 70 |
| 2. NAME OF CEO/BUSINESS OWNER                                 | <b>Sheetal Bajoria</b>   | 70 |
| 3. ANNUAL SALES/GROSS RECEIPTS                                | <b>7845581</b>   | 70 |
| 4. WHEN WAS YOUR BUSINESS ESTABLISHED?                        | <b>03/11/2003</b>  | 70 |
| 5. IN WHAT ILLINOIS COUNTY (IES) ARE YOU CONDUCTING BUSINESS? | <b>Not answered.</b>   | 70 |
| 6. CONTACT PERSON FOR THIS VENDOR REGISTRATION                | <b>Sheetal Bajoria</b>   | 70 |
| CONTACT PERSON TITLE  | <b>President</b>   |    |
| CONTACT PERSON PHONE  | <b>614-873-2222</b>  |    |
| CONTACT PERSON EMAIL  | <b>sheetal@md-signs.com</b>                                    |    |

### B. Additional Information

1. HOW DID YOU LEARN ABOUT THE ILLINOIS PROCUREMENT GATEWAY?

**Business Enterprise Program (BEP) / Veterans Business Program (VBP)**

### Additional Information

STAFF ATTACHED FILE(S)

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#### Vendor Registration

|                  |   |
|------------------|---|
| FORM NAME        | <b>C. Small Business Set-Aside Program</b>                |
| DESCRIPTION      | <b>Complete the Small Business Set-Aside Program form</b> |
| DATE SUBMITTED   | <b>2/22/2019</b>  |
| STATUS           | <b>Accepted</b>   |
| BUSINESS NAME    | <b>MDSOLUTIONS INC.</b>                                   |
| POINT OF CONTACT | <b><u>Sheetal Bajoria</u></b>                             |
| FLAG FORM        | <b><u>Add Flag</u></b>                                    |

#### C. Small Business Set-Aside Program

1. WOULD YOU LIKE TO APPLY/RE-QUALIFY FOR THE SMALL BUSINESS SET-ASIDE PROGRAM? **No**

#### Additional Information

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### Vendor Registration

|                  |  |
|------------------|--|
| FORM NAME        | <b>D - E. Department of Human Rights (DHR) &amp; Authorized to do Business in Illinois</b> |
| DESCRIPTION      | <b>Complete section D and E, in order to submit this form.</b>                             |
| DATE SUBMITTED   | <b>2/22/2019</b>   |
| STATUS           | <b>Accepted</b>  |
| BUSINESS NAME    | <b>MDSOLUTIONS INC.</b>  |
| POINT OF CONTACT | <b><u>Sheetal Bajoria</u></b>  |
| FLAG FORM        | <b><u>Add Flag</u></b>   |

### D. Department of Human Rights (DHR)

|  |   |                                     |
|--|---|-------------------------------------|
| 1. HIGHEST NUMBER OF EMPLOYEES (INCLUDING FULL AND PART TIME EMPLOYEES) AT ANY TIME DURING THE PAST YEAR | <b>11</b>   | <input checked="" type="checkbox"/> |
| 2. SELECT THE DHR STATUS OF YOUR BUSINESS  | <b>My business is not required to have a DHR Number because we had fewer than 15 employees at all times within the past year.</b> | <input checked="" type="checkbox"/> |

### E. Authorized to do Business in Illinois

|   |  |                                     |
|---|--|-------------------------------------|
| 1. IS YOUR BUSINESS REGISTERED AND AUTHORIZED TO DO BUSINESS IN ILLINOIS? | <b>Yes, registered and in good standing with the Illinois Secretary of State</b> | <input checked="" type="checkbox"/> |
|---|--|-------------------------------------|

**Additional Information**

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### Vendor Registration

|                  |   |
|------------------|---|
| FORM NAME        | <b>F - G. Certifications &amp; Board of Elections</b>       |
| DESCRIPTION      | <b>Complete section F - G, in order to submit the form.</b> |
| DATE SUBMITTED   | <b>2/22/2019</b>  |
| STATUS           | <b>Accepted</b>   |
| BUSINESS NAME    | <b>MDSOLUTIONS INC.</b>                                     |
| POINT OF CONTACT | <b><u>Sheetal Bajoria</u></b>                               |
| FLAG FORM        | <b><u>Add Flag</u></b>                                      |

### F. Certifications

1. VENDOR CERTIFIES IT AND ITS EMPLOYEES WILL COMPLY WITH APPLICABLE PROVISIONS OF THE UNITED STATES. CIVIL RIGHTS ACT, SECTION 504 OF THE FEDERAL REHABILITATION ACT, THE AMERICANS WITH DISABILITIES ACT, AND APPLICABLE RULES IN PERFORMANCE OF THIS CONTRACT. 78

**Yes**

2. THIS APPLIES TO INDIVIDUALS, SOLE PROPRIETORSHIPS, GENERAL PARTNERSHIPS, AND SINGLE MEMBER LLCs, BUT IS NOT OTHERWISE APPLICABLE. VENDOR CERTIFIES HE/SHE IS NOT IN DEFAULT ON AN EDUCATIONAL LOAN. 5 ILCS 385/3 78

**N/A**

3. VENDOR CERTIFIES THAT IT HAS REVIEWED AND WILL COMPLY WITH THE DEPARTMENT OF EMPLOYMENT SECURITY LAW (20 ILCS 1005/1005-47) AS APPLICABLE 78

**Yes**

4. VENDOR CERTIFIES IT HAS NEITHER BEEN CONVICTED OF BRIBING OR ATTEMPTING TO BRIBE AN OFFICER OR EMPLOYEE OF THE STATE OF ILLINOIS OR ANY OTHER STATE, NOR MADE AN ADMISSION OF GUILT OF SUCH CONDUCT THAT IS A MATTER OF RECORD. 30 ILCS 500/50-5 78

**Yes**

5. IF VENDOR HAS BEEN CONVICTED OF A FELONY, VENDOR CERTIFIES AT LEAST FIVE YEARS HAVE PASSED SINCE THE DATE OF COMPLETION OF THE SENTENCE FOR SUCH FELONY, UNLESS NO PERSON HELD RESPONSIBLE BY A PROSECUTOR'S OFFICE FOR THE FACTS UPON WHICH THE CONVICTION WAS BASED CONTINUES TO HAVE ANY INVOLVEMENT WITH THE BUSINESS. VENDOR FURTHER CERTIFIES THAT IT IS NOT BARRED FROM BEING AWARDED A CONTRACT. 30 ILCS 500/50-10

Yes

6. IF VENDOR OR ANY OFFICER, DIRECTOR, PARTNER, OR OTHER MANAGERIAL AGENT OF VENDOR HAS BEEN CONVICTED OF A FELONY UNDER THE SARBANES-OXLEY ACT OF 2002, OR A CLASS 3 OR CLASS 2 FELONY UNDER THE ILLINOIS SECURITIES LAW OF 1953, VENDOR CERTIFIES AT LEAST FIVE YEARS HAVE PASSED SINCE THE DATE OF THE CONVICTION. VENDOR FURTHER CERTIFIES THAT IT IS NOT BARRED FROM BEING AWARDED A CONTRACT. 30 ILCS 500/50-10.5

Yes

7. VENDOR CERTIFIES THAT IT AND ITS AFFILIATES ARE NOT DELINQUENT IN THE PAYMENT OF ANY DEBT TO THE UNIVERSITY OR THE STATE (OR IF DELINQUENT, HAVE ENTERED INTO A DEFERRED PAYMENT PLAN TO PAY THE DEBT). 30 ILCS 500/50-11, 50-60

Yes

8. 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

9. 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 NOT BARRED FROM BEING AWARDED A CONTRACT. 30 ILCS 500/50-14

Yes

10. 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 SAME, FOR NOT BIDDING ON A STATE CONTRACT. 30 ILCS 500/50-25

Yes

11. VENDOR CERTIFIES IT HAS READ, UNDERSTANDS AND IS NOT KNOWINGLY IN VIOLATION OF THE "REVOLVING DOOR" PROVISION OF THE ILLINOIS PROCUREMENT CODE. 30 ILCS 500/50-30

Yes

12. VENDOR CERTIFIES THAT IF IT HIRES A PERSON REQUIRED TO REGISTER UNDER THE LOBBYIST REGISTRATION ACT TO ASSIST IN 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

13. 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. 30 ILCS 500/50-38

Yes

14. VENDOR CERTIFIES IT WILL REPORT TO THE ILLINOIS ATTORNEY GENERAL AND THE CHIEF PROCUREMENT OFFICER ANY SUSPECTED 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**

15. 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 SUBCONTRACT THAT ARE MANUFACTURED IN THE UNITED STATES. 30 ILCS 517

**Yes**

16. VENDOR CERTIFIES THAT IF AWARDED A CONTRACT FOR PUBLIC WORKS, STEEL PRODUCTS USED OR SUPPLIED IN THE PERFORMANCE OF THAT CONTRACT SHALL BE MANUFACTURED OR PRODUCED IN THE UNITED STATES, UNLESS THE EXECUTIVE HEAD OF THE PROCURING AGENCY/UNIVERSITY GRANTS AN EXCEPTION IN WRITING. 30 ILCS 565

**Yes**

17. IF VENDOR IS AWARDED A CONTRACT WORTH MORE THAN \$5,000 AND EMPLOYS 25 OR MORE EMPLOYEES, VENDOR CERTIFIES IT WILL PROVIDE A DRUG FREE WORKPLACE PURSUANT TO THE DRUG FREE WORKPLACE ACT. 30 ILCS 580

**N/A**

18. 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

**N/A**

19. VENDOR CERTIFIES THAT NEITHER VENDOR NOR ANY SUBSTANTIALLY OWNED AFFILIATE IS PARTICIPATING OR SHALL 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**

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 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 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)

N/A

### G. Board of Elections (BOE)

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

Yes, I certify my business is registered with BOE.

MDSolutions

### Additional Information

STAFF ATTACHED FILE(S)

Attach File

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#### Vendor Registration

|                  |  |
|------------------|--|
| FORM NAME        | <b>H. Iran Disclosure</b>                                |
| DESCRIPTION      | <b>Complete section H, in order to submit this form.</b> |
| DATE SUBMITTED   | <b>2/22/2019</b>   |
| STATUS           | <b>Accepted</b>  |
| BUSINESS NAME    | <b>MDSOLUTIONS INC.</b>                                  |
| POINT OF CONTACT | <b><u>Sheetal Bajoria</u></b>                            |
| FLAG FORM        | <b><u>Add Flag</u></b>                                   |

#### H. Iran Disclosure

1. DO YOU OR ANY OF YOUR CORPORATE PARENTS OR SUBSIDIARIES HAVE ANY BUSINESS OPERATIONS THAT MUST BE DISCLOSED? 7x

**No business operations to disclose.**

#### Additional Information

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### Vendor Registration

|                  |   |
|------------------|---|
| FORM NAME        | <b>I. Financial Disclosure &amp; Conflicts of Interest</b>                |
| DESCRIPTION      | <b>Complete the Financial Disclosure &amp; Conflicts of Interest form</b> |
| DATE SUBMITTED   | <b>2/22/2019</b>  |
| STATUS           | <b>Accepted</b>   |
| BUSINESS NAME    | <b>MDSOLUTIONS INC.</b>   |
| POINT OF CONTACT | <b><u>Sheetal Bajoria</u></b>   |
| FLAG FORM        | <b><u>Add Flag</u></b>  |

### I. Financial Disclosures & Conflicts of Interest

- A. IDENTIFY THE APPLICABLE ENTITY TYPE. 70
- Other Privately Held Entity (i.e. LLC, partnership, privately held corporation with 100 or fewer shareholders, or other entity type not clearly identified in another option)**
- B. IS THERE A PARENT ENTITY THAT OWNS 100% OF THE BUSINESS? 70
- No**
- C. INSTRUMENT OF OWNERSHIP OR BENEFICIAL INTEREST 70
- Corporate Stock (C-Corporation, S-Corporation, Professional Corporation, Service Corporation)**
1. IS THERE ANY INDIVIDUAL OR ENTITY WHO MEETS ANY OF THE FOLLOWING THRESHOLDS: (A) OWNS MORE THAN 5% OF THE BUSINESS, (B) HOLDS OWNERSHIP SHARE OF THE BUSINESS VALUED IN EXCESS OF \$106,447.20, (C) IS ENTITLED TO MORE THAN 5% OF THE BUSINESS' DISTRIBUTIVE INCOME, OR (D) IS ENTITLED TO MORE THAN \$106,447.20 OF THE BUSINESS' DISTRIBUTIVE INCOME? 70
- Yes, the information is not publicly available (If any individuals are listed, answer Yes or No to questions 5-8 and 11-20.)**

| Document  | Status                                   |
|---|--|
| List of individuals or entities meeting one or more of the listed thresholds. | Attached by Sheetal Bajoria on 2/22/2019 |

**IPG Percentage of Ownership and Distributive Income Form****(1).docx (DOCX)**

2. PLEASE CERTIFY THAT THE FOLLOWING STATEMENT IS TRUE: ALL INDIVIDUALS OR ENTITIES THAT HOLD AN OWNERSHIP INTEREST IN THE BUSINESS OF GREATER THAN 5% OR VALUED GREATER THAN \$106,447.20 HAVE BEEN DISCLOSED IN QUESTION 1.

**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.

**Yes**

4. DISCLOSURE OF BOARD OF DIRECTORS FOR NOT-FOR-PROFIT ENTITIES.

**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?

**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?

**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?

**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?

**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)?

**Not applicable - I answered No in Questions 5-8**

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)?

**Not applicable - I answered No in Questions 5-8**

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.

**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.

**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?

**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?

**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?

**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?

**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?

**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?

**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?

**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?

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.

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.

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.

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.

No

### Additional Information

STAFF ATTACHED FILE(S)

Attach File

[Refresh List](#) after attaching file(s).

[Customer Support](#)

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4100162600

# THA - Toll Highway Authority

P.O. Date: 10/17/2018

## Purchase Order

|                        |
|------------------------|
| Purchase Order Number  |
| 19-557THA-ENGSI-P-4002 |
| Master Contract? N     |
| Contract/Ob #:         |

|        |   |
|--------|---|
| VENDOR | Vendor Number: V00004276                                    |
|        | MDSolutions   |
|        | 8225 Estates Pkwy   |
|        | Plain City, OH 43064<br>neil@md-signs.com<br>(614) 873-2222 |

|                |                         |
|----------------|-------------------------|
| SHIP TO        | Receiving               |
|                | 4 S 496 Naperville Road |
|                | Central Warehouse       |
|                | Naperville, IL 60563    |
|                | US                      |
| Email:         |                         |
| (630) 241-6800 |                         |

**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.

|                |                                 |
|----------------|---------------------------------|
| BILL TO        | Contract Administrator          |
|                | PO Box 3094                     |
|                | Lisle, IL 60532-8094            |
|                | US                              |
|                | Email: ProInvoices@getipass.com |
| (630) 241-6800 |                                 |

|                                 |                                     |
|---------------------------------|-------------------------------------|
| Shipping Method: Best Way       | Freight Terms: Freight Prepaid      |
| Shipping Terms:                 | Payment Terms: NA                   |
| Solicitation (Bid) No.: N/A     | Delivery Calendar Day(s) A.R.O.: 15 |
| Contract Begin Date: 03/01/2018 | Contract End Date: 02/28/2021       |

Item # 1  
Class-Item 570-05  
  
Aluminum Sign Extrusions

| Quantity | Unit Price | UOM | Discount % | Total Discount Amt. | Tax Rate | Tax Amount | Freight | Total Cost    |
|----------|------------|-----|------------|---------------------|----------|------------|---------|---------------|
| 99367.00 | \$ 6.744   | FT2 | 0.00 %     | \$ 0.00             |          | \$ 0.00    | \$ 0.00 | \$ 670.131.05 |

|         |                          |
|---------|--------------------------|
| SHIP TO | Ship To - CA             |
|         | 2700 Ogden Avenue        |
|         | Central Administration   |
|         | Downers Grove, IL 60515  |
|         | US                       |
|         | Email:<br>(630) 241-6800 |

Item # 2  
Class-Item 570-05

Renewal for Aluminum extrusions contract for period on one (1) year from 2/29/2020 - 02/28/2021.

| Quantity | Unit Price | UOM | Discount % | Total Discount Amt. | Tax Rate | Tax Amount | Freight | Total Cost    |
|----------|------------|-----|------------|---------------------|----------|------------|---------|---------------|
| 74183.00 | \$ 6.74    | EA  | 0.00 %     | \$ 0.00             |          | \$ 0.00    | \$ 0.00 | \$ 499,993.42 |

TAX: \$ 0.00  
FREIGHT: \$ 0.00  
TOTAL: \$ 1,170,124.47

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: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
Email: \_\_\_\_\_  
Date: \_\_\_\_\_

APPROVED


By: Sonja Wolniakowski  
Phone#: (630) 241-6800  
BUYER

State of Illinois Agency or Other Purchasing Entity  
Procuring State Agency or Entity: \_\_\_\_\_

Illinois State Toll  
Highway Authority

Official Signature: 

Printed Name: José R. Alvarez  
Title: Executive Director

Designee Signature: 

Printed Name: John Donato  
Title: Chief of Procurement

Date: 2/28/20

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: \_\_\_\_\_  
IPG Cert/Disclosure Yes \_\_\_\_\_ No \_\_\_\_\_



# THA - Toll Highway Authority

Internal Number: 3

## Vendor Change Order #3

Purchase Order Number  
19-557THA-ENGSI-P-4002

|                            |                          |
|----------------------------|--------------------------|
| V<br>E<br>N<br>D<br>O<br>R | Vendor Number: V00004276 |
|                            | MDSolutions              |
|                            | 8225 Estates Pkwy        |
|                            | Plain City, OH 43064     |
|                            | neil@md-signs.com        |
|                            | (614) 873-2222           |

|                                |  |
|--------------------------------|--|
| S<br>H<br>I<br>P<br><br>T<br>O |  |
|                                |  |
| B<br>I<br>L<br>L<br><br>T<br>O |  |
|                                |  |

**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.

|                                 |                                     |
|---------------------------------|-------------------------------------|
| Shipping Method: Best Way       | Freight Terms: Freight Prepaid      |
| Shipping Terms:                 | Payment Terms: NA                   |
| Solicitation (Bid) No.: N/A     | Delivery Calendar Day(s) A.R.O.: 15 |
| Contract Begin Date: 03/01/2018 | Contract End Date: 02/28/2020       |

|               |                      |
|---------------|----------------------|
| TAX:          | \$ 0.00              |
| FREIGHT:      | \$ 0.00              |
| <b>TOTAL:</b> | <b>\$ 499,993.42</b> |

APPROVED

By: Sonja Wolniakowski

Phone#: (630) 241-6800

BUYER

# THA - Toll Highway Authority

Internal Number: 2

## Vendor Change Order #2

|   |
|---|
| Purchase Order Number<br>19-557THA-ENGSI-P-4002 |
|---|

|                            |   |
|----------------------------|---|
| V<br>E<br>N<br>D<br>O<br>R | Vendor Number: V00004276                                    |
|                            | MDSolutions   |
|                            | 8225 Estates Pkwy   |
|                            | Plain City, OH 43064<br>neil@md-signs.com<br>(614) 873-2222 |

|                                |  |
|--------------------------------|--|
| S<br>H<br>I<br>P<br><br>T<br>O |  |
|                                |  |
| B<br>I<br>L<br>L<br><br>T<br>O |  |
|                                |  |

**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.

|  |                               |  |
|--|-------------------------------|--|
| Shipping Method: Best Way<br>Shipping Terms:<br>Solicitation (Bid) No.: N/A<br>Contract Begin Date: 03/01/2018 | Contract End Date: 02/28/2020 | Freight Terms: Freight Prepaid<br>Payment Terms: NA<br>Delivery Calendar Day(s) A.R.O.: 15 |
|--|-------------------------------|--|

Item # 1  
 Change Details: (see Change Order tab for additional detail)

Quantity changed from "119240.40400" to "99367.0"

Unit Cost changed from "5.62000" to "6.744"  
 Material Master #:  
 Class-Item 570-05

| Quantity   | Unit Price | UOM | Discount % | Total Discount Amt. | Tax Rate | Tax Amount | Freight | Total Cost    |
|------------|------------|-----|------------|---------------------|----------|------------|---------|---------------|
| -19873.404 | \$ 1.124   |     |            |                     |          |            |         | -\$ 0.02      |
| 99367.00   | \$ 6.744   | FT2 | 0.000%     | \$ 0.00             | 0.000%   | \$ 0.00    | \$ 0.00 | \$ 670,131.05 |

|                            |  |
|----------------------------|--|
| S<br>H<br>I<br>P<br>T<br>O | Ship To - CA<br>2700 Ogden Avenue<br>Central Administration<br>Downers Grove, IL 60515<br>US<br>Email:<br>(630) 241-6800 |
|----------------------------|--|

TAX: \$ 0.00  
 FREIGHT: \$ 0.00  
 TOTAL: -\$ 0.02

APPROVED

By: Sonja Wolniakowski

Phone#: (630) 241-6800

BUYER

# THA - Toll Highway Authority

Internal Number: 1

## Vendor Change Order #1

|   |
|---|
| Purchase Order Number<br><br>19-557THA-ENGSI-P-4002 |
|---|

|                            |   |
|----------------------------|---|
| V<br>E<br>N<br>D<br>O<br>R | Vendor Number: V00004276<br>MDSolutions<br><br>8225 Estates Pkwy<br>Plain City, OH 43064<br>neil@md-signs.com<br>(614) 873-2222 |
|----------------------------|---|

|                                |  |
|--------------------------------|--|
| S<br>H<br>I<br>P<br><br>T<br>O |  |
| B<br>I<br>L<br>L<br><br>T<br>O |  |

**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.

|   |  |
|---|--|
| Shipping Method: Best Way<br>Shipping Terms:<br>Solicitation (Bid) No.: N/A<br>Contract Begin Date: 03/01/2018      Contract End Date: 02/28/2020 | Freight Terms: Freight Prepaid<br>Payment Terms: NA<br>Delivery Calendar Day(s) A.R.O.: 15 |
| PO Administrative Changes: (see Change Order tab for additional detail)<br>Custom Field: Custom Field changed from "558442.54" to "670131.07"     |  |

Item # 1  
 Change Details: (see Change Order tab for additional detail)

Quantity changed from "99367.00000" to "119240.404"  
 Material Master #:  
 Class-Item 570-05

| Quantity   | Unit Price | UOM | Discount % | Total Discount Amt. | Tax Rate | Tax Amount | Freight | Total Cost    |
|------------|------------|-----|------------|---------------------|----------|------------|---------|---------------|
| 19873.404  |            |     |            |                     |          |            |         | \$ 111,688.53 |
| 119240.404 | \$ 5.62    | FT2 | 0.000%     | \$ 0.00             | 0.000%   | \$ 0.00    | \$ 0.00 | \$ 670,131.07 |

|                                |  |
|--------------------------------|--|
| S<br>H<br>I<br>P<br><br>T<br>O |  |
|--------------------------------|--|

TAX: \$ 0.00  
 FREIGHT: \$ 0.00  
 TOTAL: \$ 111,688.53

APPROVED

By: Sonja Wolniakowski  
 Phone#: (630) 241-6800  
 BUYER