**ATTACHMENT 2 – PROPOSAL CHECKLIST**

In order to be deemed responsive, a proposal package must contain all of the items identified below as required; optional attachments that are not applicable do not need to be included. The Proposer must complete this checklist to confirm the items contained in the proposal submission by marking the boxes next to the items included.

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| --- | --- | --- |
| **REQUIRED ADMINISTRATIVE ATTACHMENTS** | | |
| **Included** | **Number** | **Name** |
|  | 1 | Proposal Cover Page |
|  | 2 | Proposal Checklist |
|  | 3 | Proposer’s Minimum Qualifications Certification |
|  | 4 | Proposer’s Agency Fact Sheet |
|  | 5 | Proposed Subcontractor Agency Fact Sheet |
|  | 6 | Guaranty |
| ☐ | 7 | Conflict of Interest |
|  | 8 | Bankruptcy and Litigation Disclosure |
|  | 9 | Payee Data Record (STD. 204) |
|  | 10 | Contractor Certification Form |
|  | 11 | Statement of Economic Interests Certification |
| ☐ | 12 | GenAi Reporting and FactSheet (STD 1000) |
|  | 13 | Bidder Declaration (GSPD-05-105) |
|  | ~~14~~ | ~~Staffing Plan and Hourly Rates~~ |
|  | 16 | Client References |

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| **OPTIONAL ADMINISTRATIVE ATTACHMENTS** | | |
| **Included** | **Number** | **Name** |
|  | 9a | Payee Data Record Supplement (STD. 205)  This form is optional. Form is used to provide remittance address information if different than the mailing address on the STD 204 – Payee Data Record. Use this form to provide additional remittance addresses and additional Authorized Representatives of the Payee not identified on the STD 204.) STD 205 (New 03/2021) |
| ☐ | 15 | Disabled Veteran Business Enterprise Declarations (STD. 843) |

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| **REQUIRED ADMINISTRATIVE DOCUMENTS** | |
| **Included** | **Name** |
|  | Certificate of Liability Insurance (or letter explaining why it is not included at this time) |
|  | Proof of Worker’s Compensation Liability Insurance |
|  | Proof of Automobile Liability Insurance (or letter explaining why it is not included at this time) |
|  | Proof of Active status with the California SOS (Current Certificate of Status or copy of Entity Detail page from SOS Business Search) |
|  | Proof of Professional Liability Insurance (or letter explaining why it is not included at this time) |
| ☐ | Proof of Cyber Liability Insurance (or letter explaining why it is not included at this time) |

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| **REQUIRED MODEL CONTRACT WITH EXHIBITS – DUE AT STAGE 3** | |
| **Included** | **Name** |
|  | Standard Agreement (STD. 213) |
|  | Exhibit A – Scope of Work |
|  | Exhibit A, Attachment 1 – Work Authorization |
|  | Exhibit B – Budget Detail and Payment Provisions |
|  | Exhibit B, Attachment 1 – Cost Worksheet |
|  | Exhibit C – General Terms and Conditions |
|  | Exhibit C, Attachment 1 – Resumes |
|  | Exhibit D – Privacy Addendum |
| ☐ | Exhibit E – Travel Reimbursement |

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| **REQUIRED ADMINSTRATIVE DOCUMENTS – DUE AT STAGE 2** | | |
| **Included** | **Number** | **Name** |
| ☐ | 14 | Staffing Plan and Hourly Rates |