

**APPENDIX D- BIDDER INFORMATION AND PROFILE**

**Bidders shall provide the following required information. Where additional space is needed and/or where specifically requested, submit an additional letter.**

**1. Company Name:** Aeroflex Wichita, Inc.  
Address: 10200 West York Street  
City: Wichita State: Kansas Zip: 67215  
Phone: 800-835-2352 FAX (if any): \_\_\_\_\_  
Washington State Department of Revenue Registration Tax number: 602-112-995  
Federal Tax ID No.: 48-0777904  
Company Internet URL Address (if available): www.aeroflex.com

**2. Legal Status of the Bidder:**  
Corporation: X Partnership: \_\_\_\_\_ Sole Proprietor: \_\_\_\_\_ Other: \_\_\_\_\_

**3. Bidder's Authorized Representative:** (Reference Section 4.2 of the Solicitation Document and Section 2.3 of Appendix M - Model Contract)  
Name: Kimberly Taylor  
Title: Contracts Manager  
Phone: 316-529-5521 FAX: \_\_\_\_\_ E-mail: kimberly.taylor@aeroflex.com

**4. Orders to be sent to:**  
Company Name: Aeroflex Wichita, Inc. (SEE APPENDIX F)  
Address: 10200 West York Street  
City: Wichita State: Kansas Zip: 67215  
Phone: 800-835-2352 FAX: \_\_\_\_\_ E-mail: avcomm.sales@aeroflex.com  
Internet address for company catalog (if available):  
www.aeroflex.com

**5. Billing will be from:**  
Company Name: Aeroflex Wichita, Inc.  
Address: 10200 West York Street  
City: Wichita State: Kansas Zip: 67215  
Phone: 316-529-5314 FAX: \_\_\_\_\_ E-mail: avcomminvoicing@aeroflex.com

**6. Payment to be sent to:**  
Company Name: Aeroflex Wichita, Inc.  
Address: P.O. Box 74008125

City: Chicago State: Illinois Zip: 60674  
Phone: 316-529-5314 FAX: \_\_\_\_\_ E-mail: avcomm invoicing@aeroflex.com

**7. Minority/Women Owned Business (MWBE):** (Reference Section 1.10 of the Solicitation Document)

Yes: \_\_\_\_\_ No: X (Check only one): Minority: \_\_\_\_\_ Women: \_\_\_\_\_

Washington State Certification No: \_\_\_\_\_ Self-Certified: \_\_\_\_\_ (check if applicable)

**8. Reciprocity:** Firms bidding from California only: Is your firm currently certified as a small business under California Code, Title 2, Section 1896.12? Yes \_\_\_\_\_ No X.

**9. Payment Methods and Term:**

Prompt Payment Discount 0 % 30 days or Net 30 days. Note: Prompt payment discount periods equal to (or greater than) 30 calendar days will receive consideration and proposal pricing will be reduced (for evaluation purposes only) by the amount of that discount(s). (Reference Section 4.8 Payment Terms of the Solicitation Document)

Purchasing (charge) Cards accepted: Yes X No \_\_\_\_\_. Payment by Purchasing Card may qualify for Prompt Payment Discount and no additional card fee or processing charge shall be permitted. Bidder is to identify the purchasing (charge) cards they accept:

Aeroflex accepts all major credit cards.

**10. Customer References** (Reference Appendix I Customer Reference Questionnaire): Bidder has asked the following customer references to complete and submit customer reference questionnaires to the Procurement Coordinator and to identify the public safety communication equipment purchased from the company by category: Four returned reference questionnaires will be needed for each equipment category and the aggregate value of purchases must have exceeded \$250,000 during the past two years. (Reference Section 4.10 Customer References)

- Reference name: State of Washington - Patrol

Contact person and telephone: Mark Vetsch - (509) 249-6713

Equipment categories/subcategories: Testing Equipment

- Reference name: State of Kansas – Dept. of Transportation

Contact person and telephone: Robert Childs - (316) 744-1271

Equipment categories/subcategories: Testing Equipment

- Reference name: State of Idaho – Public Safety Communications

Contact person and telephone: Robert Hugi - (208) 288-4007

Equipment categories/subcategories: Testing Equipment

- Reference name: State of California - Office of Emergency Services

Contact person and telephone: Shawn Southmayd - (916) 657-6141

Equipment categories/subcategories: Testing Equipment

- Reference name: City and County of Denver

Contact person and telephone: Myron Kissinger - (720) 865-0062

Equipment categories/subcategories: Testing Equipment

- Reference name: Snohomish County Public Utility District

Contact person and telephone: John Thorsen - (425) 783-4431

Equipment categories/subcategories: Testing Equipment

- Reference name: \_\_\_\_\_

Contact person and telephone:

\_\_\_\_\_

Equipment categories/subcategories:

\_\_\_\_\_

- Reference name: \_\_\_\_\_

Contact person and telephone:

\_\_\_\_\_

Equipment categories/subcategories:

\_\_\_\_\_

**11. Contract Savings:**

Without benefit of this NASPO ValuePoint contract, Bidder would normally charge state/local government agency purchasers 3 % more than the pricing offered in response to this RFP for the following product categories/subcategories. (This question is being asked to assess the potential savings to the NASPO ValuePoint customers who may consider using this contract.)