



CITY OF MADISON PURCHASING SERVICES

BIDDER DISCLOSURE STATEMENT - PROCUREMENT OF ITEMS OF APPAREL

CONTRACTOR SUBMITTING THIS FORM:.....

BID/RFP NUMBER.....DATE:

PRODUCTS COVERED BY THIS FORM (LINE #s FROM RFP):.....

This affidavit of compliance will be the contractor's sworn statement that each proposed production facility, including those of any subcontractors, comply with all of the requirements of Madison General Ordinances, sec. 4.25. If awarded the contract, an updated version of this disclosure statement shall be submitted quarterly to the City of its independent monitoring agency.

A. Below provide the name and address of each FACILITY OR FACTORY at which items of apparel have been or will be produced, manufactured, assembled, finished, distributed, laundered or dry cleaned under this contract (NOT A BUSINESS OR CORPORATE OFFICE). Include the name, business address and phone numbers of the principle officers/partners/owners of each facility. Include the raw number (quantity) of each type of good or product produced at each facility (i.e., 5,000 SHIRTS). See the Example Form if this is unclear. You may use an additional sheet for each facility location.

Name of Facility and Subcontractor	
Complete Facility Mailing Address (Street, City, Country, Postal Code)	
Facility Phone Number	
Name of Principal Officers/Owners	
Business Address of Principal Officers/Owners (Street, City, Country, Postal Code)	
Phone of Principal Officers/Owners	
Quantity of Goods for This Contract (if known)	

B. For the above facility, provide the base hourly wage of non-supervisory employees, the percent of wage level paid as health benefits or other benefits (specify which), any other regular deduction from paychecks, the normal working hours per employee per day and per week, the average working hours per day and per week over the past three (3) months, and a description of the overtime policy. See the Example Form if this is unclear. You may use an additional sheet for each facility location.

Name of Facility and Subcontractor			
Base Hourly Wage		Normal Work Day (Hours)	
% of Wage Level Paid as Health Benefits		Normal Work Week (Hours)	
% Paid as Other Benefits		Actual Average Over 3 Months (Hours)	
Other Regular Deductions		Overtime Policy _____ _____	



**CITY OF MADISON PURCHASING SERVICES
BIDDER DISCLOSURE STATEMENT - PROCUREMENT OF ITEMS OF
APPAREL**

If this disclosure statement reveals noncompliance with sec. 4.25 MGO, or a statement that the proposed contractor will not or cannot comply with MGO 4.25, the City reserves the right not to award the contract.

Further, I understand that any false statement on these forms could result in:

- Withholding of payments under an existing contract.
- Liquidated Damages of \$2,000 per violation or 20% of the value of the items of apparel or material that we produced in violation of the ordinance.
- Termination, suspension or cancellation of the contract in whole or in part.
- Nonrenewal.
- Disqualification from bidding on future city contracts or eligibility to enter into purchase orders when formal bidding is not required, for a period of one (1) year after the first violation is found and for a period of three (3) years after a second or subsequent violation is found.

To the best of my knowledge, each production facility, including those of any subcontractors, comply with all of the requirements of Madison General Ordinances, sec. 4.25. I have completed this Disclosure Statement form in good faith and have made no willingly false or misleading statements.

I/We hereby state that we will comply with Section 4.25 of the City of Madison General Ordinances as stated above. I/We further understand that this Disclosure Statement may be made public, subject to applicable public record laws.

AUTHORIZED SIGNATURE: _____

PRINTED NAME: _____

COMPANY NAME: _____