Question	Response
Name:	
Contact Person:	
Telephone:	
Fax:	
Email Address:	
Street Address:	
City:	
State & Zip:	
Web Address:	
Year Company Founded:	
Local Office Distance to BAS:	
ls on-site service available:	
Is there a trip charge:	
If so, what is the trip charge:	
If no trip charge, is travel time charged:	

Building	Purchase Price	B/W Per print price	Color Per print price
Byron High School			
Byron Middle School			
Byron Elementary School			
Byron Transportation			
District Totals			

1. Name	
Contact Name	
Telephone Number	
Description of services provided to this client	
2. Name	
Contact Name	
Telephone Number	
Description of services provided to this client	
2 Name	
Name Contact Name	
Telephone Number	
Description of services provided to this client	
4. Name	
Contact Name	
Telephone Number	

Description of services provided to this client	
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Specification Type	Distict's Requirement (if stated)	Vendor's Specification
BACKGROUND INFO		
Vendor's Company		
Bid Price		
Manufacturing Status:	new	
Domestic Intro Date		
Minimum Monthly Volume:	200,000	
GENERAL SPECIFICATIONS/ PAPER/		
HANDLING		
First Copy Time:	4.6 sec	
Multicopy (Ltr/Lgl/Ledg):		
Warm-up:		
Std Paper Source(s):		
Std Paper Capacity:	6,000 min	
Paper Weights:	16lb. To 80lb.	
Bypass/Paper Weights:	16lb. To 80lb. Cover	
Max Paper Sources/Cap:	3 trays + by pass	
Max Original Size:	11x17	
Min/Max Output Size:	5-1/2x8-1/2 to 11x17	
Scan/Copy Resolution:	4800 x 600 dpi (navtive 600x600)	
Std/Max Copier Memory:	50GB	
Duplex:	auto (1:2,2:2,2:1)	
Duplex Capacity/Paper Sizes:	100 Sheets/ 5-1/2x8-1/2 to 11x17	
Document Feeder:		
Doc. Feeder Speed/Capacity:	90opm/75 orig	
Doc. Feeder Paper Weights:	13 ro 32 lbs	
Finisher:	3&2hole punch, Staple, collate	
Tray/Stapling/Posts:		
Other:	Tri-fold\Bi-Fold Booklets	
Dimension(HxWxD):		
Weight:		
Power Requirements:	110v	1
Dedicated Outlet:		
Hard Drive	60GB	
Energy-Star:	Yes	
Opr. Noise Level:	65db	
CONNECTIVITY SPECIFICATIONS		
Operating System Support:	Win10, Win11, Macintosh, Chrome	
Parallel Interface:	, , , , , , , , , , , , , , , , , , , ,	+

PC FAX/Print/Scan:		
Serial Interface:		
PC FAX/Print/Scan:		
USB Interface:		
PC FAX/Print/Scan:		
	Std. Ethernet 10/100/1000, optional	
Network Interface:	802.11a/b/g	
	Std. Ethernet 10/100/1000, optional	
Interface Type:	802.11a/b/g	
LAN Fax/Print/Scan:	yes/yes/yes	
Networks Supported	Microsoft Server	
Microsoft Enterprise Server	Yes	
Windows	Yes	
SCANNER & IMAGE MGMT. SPECS.		
Connection Type:	Network	
Technology/Speed		
Max Resolution:	1200x1200dpi	
TWAIN/ISIS Compatible:	Yes	
Scan/Image Software:	Scan to PC desktop	
OCR Software:		
File Mgmt Software:		
Scan-to-Email:	Microsoft LDAP address lookup	
Scan-to-Network	FTP	
Other document formats provided	PDF, JPG, TIFF, others?	

## AFFIDAVIT OF COMPLAINT - IRAN ECONOMIC SANCTIONS ACT Michigan Public Act No. 517 of 2012

The undersigned, the owner or authorized officer of (the "Bidder"), pursuant to the compliance certification requirement provided in the Byron Area Schools Invitation to Bid, hereby certifies, represents and warrants that the Bidder (including its officers, directors and employees) is not an "Iran Linked Business" within the meaning of the Iran Economic Sanctions Act, Michigan Public Act No. 517 of 2012 (the "Act"), and that in the event Bidder is awarded a Contract as a result of the aforementioned Request for Proposal, the Bidder will not become an "Iran Linked Business" at any time during the course of performing under the Contract.

The Bidder further acknowledges that any person who is found to have submitted a false certification is responsible for a civil penalty of not more than \$250,000.00 or 2 times the amount of the Contract or proposed Contract for which the false certification was made, whichever is greater, the cost of Byron Area Schools's investigation, and reasonable attorney fees, in addition to the fine. Moreover, any person who submitted a false certification shall be ineligible to bid on an Invitation To Bid for three (3) years from the date the it is determined that the person has submitted the false certification.

years from the date the it is determined that the person has submitted the false certification.						
Vendor Information						
Name of Bidder						
Ву						
Date						
State of	)	SS.				
County of	)					
Notarized Signature						
This instrument was ackr	nowledged before mo	e on the	date	day of	, year by	
Bidder Signature Nam	е			ĺ	•	
	Notary Signature					
	Nata w Mara					

Notary Name County,

My Commission Expires

Acting in the County of

## All bidders must complete the following disclosure form in compliance with MCL 380.1267 and attach this information to their proposal.

By the attached sworn and notarized statement, we are disclosing the following familial relationship(s) that exists between the owner or any employee of the Vendor and any member of the Districts' Board, employees, or the superintendent.

Disclose any familial relationship and complete the form below in its entirety:

The following are familial relationships as described above (provide employee name, family contact name, family contact position, and familial relationship or NONE).

Owner/ Employee Name	Related To:	Relationship
1.		
2.		
3.		
4.		
	Vendor Information	
Signature(s):		
Title:		
Name of Firm:		
State of	)	
County of	) SS )	
	Notarized Signature	
On this	day of	, before me a Notary
Public in and for said county, personally	appeared agent of the said	
firm and who acknowledged the same	to be his free act and deed as	
such		
agent.		
Notary Public	My Commiss	sion Expires