

**CONTRACT DOCUMENTS  
BOONE COUNTY, MISSOURI  
BID NO: 76-23NOV04 Pre-Numbered and Labeled File Folders**

**ADDENDUM #2**  
**(Issued November 16, 2004)**

This addendum is issued in accordance with the Introduction and General Conditions of Bidding and is hereby incorporated into and made a part of the Contract Documents. Bidders are reminded that receipt of this addendum should be acknowledged and submitted with bidder's *Response Form*.

Specifications for the above noted Request for Bid and the work covered thereby are herein modified as follows, and except as set forth herein, otherwise remain unchanged and in full force and effect:

**BID DOCUMENTS:**

**Add the following section as 2.1.5.**

With the exception of the Smead 2K2-150L 1&3 UPC #14513 folders, all folders must meet the following specifications:

- Letter size folder measuring 12-1/4" W X 9-1/2 " H Overall, 1-3/4" W Body, 9-1/2" H front
- Two-ply tab
- 11 pt stock
- Straight cut tab, 1/2" wide
- Front panel under-cut 1/4" deep
- Two fasteners per folder centered on each inside page
- Scored for 3/4" expansion
- Top corners rounded, front and back
- 2" prong "B" style fasteners

**Add the following sentence to section 2.2.4.1.**

Measuring 1-1/2"W x 3/4" H before folding, all first position labels must be consistent in color

**Add the following sentence to section 2.2.4.2.**

Measuring 1-1/2" W x 3/4" H before folding. All second position labels must be white background with black letters.

**Add the following sentence to section 2.2.4.3.**

Measuring 1-1/2"W x 3/4" H before folding. All third position labels must be white background with black letters

**Add the following information to section 2.2.4.4.**

5 DCCRN-5BN (67345)

**Revise section 2.2.5. as follows:**

A sample of the folders shall be made available upon request. The contractor must submit a proof of the folder containing the attached label to Rosa Dietiker in the Circuit Clerk's Office prior to beginning production on the folders. The contractor must receive approval on the sample folder before beginning production.

**Revise section 2.2.6. as follows:**

The contractor shall provide the County with a copy of the in-house software program used to print and apply color-coded, bar-coded file folder labels.

**Add the following section as 2.2.7.**

The contractor must also provide the County with individual labels as specified below and in the quantities stated. All individual labels shall be in the same style as the ETYJ year labels. With the exception of the year labels, all labels identified below must be white background with black lettering.

Quantity	Description
1000	2005 (05) ETYJ Smead Color Coded Year Labels or Equivalent
2000	Labels with the letters "BA" measuring 1-1/2"W x 3/4"H before folding
1000	Labels with the letters "TR" measuring 1-1/2"W x 3/4"H before folding
1000	Labels with the letters "MC" measuring 1-1/2"W x 3/4"H before folding
1000	Labels with the letters "TC" measuring 1-1/2"W x 3/4"H before folding
1000	Labels with the letters "MU" measuring 1-1/2"W x 3/4"H before folding
1000	Labels with the letters "CR" measuring 1-1/2"W x 3/4"H before folding
1000	Labels with the letters "CV" measuring 1-1/2"W x 3/4"H before folding
1000	Labels with the letters "FC" measuring 1-1/2"W x 3/4"H before folding
500	Labels with the letters "PR" measuring 1-1/2"W x 3/4"H before folding
500	Labels with the letters "MH" measuring 1-1/2"W x 3/4"H before folding

**Revise section 4. as follows:**

Section 4. Response Form has been replaced as attached. Please disregard the original Response Form.

By:   
**Heather Turner, CPPB**  
**Buyer, Purchasing**

BIDDER has examined copy of Addendum #2 to Bid Number 76-23NOV04 – Pre-Numbered and Labeled File Folders, receipt of which is hereby acknowledged:

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Authorized Representative Signature: \_\_\_\_\_

Date: \_\_\_\_\_

4. **Response Form**

- 4.1. Company Name: \_\_\_\_\_
- 4.2. Address: \_\_\_\_\_
- 4.3. City/Zip: \_\_\_\_\_
- 4.4. Phone Number: \_\_\_\_\_
- 4.5. Fax Number: \_\_\_\_\_
- 4.6. Federal Tax ID: \_\_\_\_\_
- 4.6.1.  Corporation
- Partnership - Name \_\_\_\_\_
- Individual/Proprietorship - Individual Name \_\_\_\_\_
- Other (Specify) \_\_\_\_\_

4.7. PRICING - FOLDERS	<u>QTY</u>	<u>Price Per 100 Folders</u>	<u>Extended Price</u>
4.7.1. SMEAD 2BET2-150LBE 1&3 (Blue)	7000	\$ _____	\$ _____
4.7.2. SMEAD 2BET2-150LGN 1&3 (Green)	5000	\$ _____	\$ _____
4.7.3. SMEAD 2BET2-150L 1&3 (Manila)	9500	\$ _____	\$ _____
4.7.4. SMEAD 2BET2-150LR 1&3 (Red)	1200	\$ _____	\$ _____
4.7.5. SMEAD 2BET2-150LY 1&3 (Yellow)	1500	\$ _____	\$ _____
4.7.6. SMEAD 2K2-150L 1&3 (Manila)	1200	\$ _____	\$ _____
4.7.7. TOTAL			\$ _____
4.7.8. Copy of Software Used to Print Labels		\$ _____	

4.8. PRICING - INDIVIDUAL LABELS	<u>QTY</u>	<u>Price per 500 Labels</u>	<u>Extended Price</u>
4.8.1. 2005 (05) ETYJ Year Labels	1000	\$ _____	\$ _____
4.8.2. "BA" Labels	2000	\$ _____	\$ _____
4.8.3. "TR" Labels	1000	\$ _____	\$ _____
4.8.4. "MC" Labels	1000	\$ _____	\$ _____
4.8.5. "TC" Labels	1000	\$ _____	\$ _____
4.8.6. "MU" Labels	1000	\$ _____	\$ _____
4.8.7. "CR" Labels	1000	\$ _____	\$ _____
4.8.8. "CV" Labels	1000	\$ _____	\$ _____

4.8.9. "FC" Labels	1000	\$ _____	\$ _____
4.8.10. "PR" Labels	500	\$ _____	\$ _____
4.8.11. "MH" Labels	500	\$ _____	\$ _____
4.8.12. TOTAL		\$ _____	\$ _____

**4.9. DESCRIBE ANY DEVIATION(S)**

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4.10. The undersigned offers to furnish and deliver the articles or services as specified at the prices and terms stated and in strict accordance with all requirements contained in the Request for Bid which have been read and understood, and all of which are made part of this order. By submission of this bid, the vendor certifies that they are in compliance with Section 34.353 and, if applicable, Section 34.359 ("Missouri Domestic Products Procurement Act") of the Revised Statutes of Missouri.

4.10.1. Authorized Representative (Sign By Hand):

\_\_\_\_\_ Date: \_\_\_\_\_  
 Print Name and Title of Authorized Representative  
 \_\_\_\_\_

4.11. Maximum Percentage Increase \_\_\_\_\_% 1<sup>st</sup> Renewal \_\_\_\_\_% 2<sup>nd</sup> Renewal

4.12. Delivery ARO: \_\_\_\_\_