

**COUNTY OF LOS ANGELES - DEPARTMENT OF PUBLIC HEALTH  
STATEMENT OF QUALIFICATIONS (SOQ)  
CHECKLIST – EXHIBIT 1**

PROPOSER NAME:

<b>RFSQ, Paragraph 2.7.1, Table of Contents (Proposer’s SOQ)</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
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<b>RFSQ, Paragraph 2.7.2, A. Vendor’s Background and Experience (Proposer’s SOQ)</b>	
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Exhibit 1: Statement of Qualifications Checklist	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Exhibit 2: Vendor’s Organization Questionnaire/Affidavit and CBE Information	<input type="checkbox"/> Yes <input type="checkbox"/> No
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<p><b>For each category for which Vendor is attempting to qualify</b> Vendor submitted a Statement of Experience that:</p> <p>1) demonstrates firm’s ability to carry out the specialized media needs of the Department:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> <b>Designing and Creating</b></li> <li><input type="checkbox"/> <b>Media Planning and Buying</b></li> <li><input type="checkbox"/> <b>Social Media</b></li> <li><input type="checkbox"/> <b>Public Relations</b></li> <li><input type="checkbox"/> <b>Community Outreach</b></li> <li><input type="checkbox"/> <b>Public Affairs</b></li> </ul> <p>2) provides a summary of relevant background information to demonstrate that the vendor meets the minimum qualifications, including years in service, stated in subparagraph 1.4 of this RFSQ, and</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> <b>Designing and Creating</b></li> <li><input type="checkbox"/> <b>Media Planning and Buying</b></li> <li><input type="checkbox"/> <b>Social Media</b></li> <li><input type="checkbox"/> <b>Public Relations</b></li> <li><input type="checkbox"/> <b>Community Outreach</b></li> <li><input type="checkbox"/> <b>Public Affairs</b></li> </ul> <p>3) does not exceed three (3) pages.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> <b>Designing and Creating</b></li> <li><input type="checkbox"/> <b>Media Planning and Buying</b></li> <li><input type="checkbox"/> <b>Social Media</b></li> <li><input type="checkbox"/> <b>Public Relations</b></li> <li><input type="checkbox"/> <b>Community Outreach</b></li> <li><input type="checkbox"/> <b>Public Affairs</b></li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/>Yes <input type="checkbox"/>No</li> </ul>
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Vendor furnished a copy of Certificate of Good Standing (if Corporation or LLC)	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Vendor furnished a copy of Statement of Information (if Corporation or LLC)	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Vendor furnished a copy of Certificate of Limited Partnership or Application for Registration of Foreign Limited Partnership (if Limited Partnership)	<input type="checkbox"/> Yes <input type="checkbox"/> No
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<b>RFSQ, Paragraph 2.7.2, B. Vendor References (Proposer’s SOQ Section A.2)</b>		
Exhibit 7: Prospective Contractor References		<input type="checkbox"/> Yes <input type="checkbox"/> No
Exhibit 8: Prospective Contractor List of Contracts		<input type="checkbox"/> Yes <input type="checkbox"/> No
Exhibit 9: Prospective Contractor List of Terminated Contracts		<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>RFSQ, Paragraph 2.7.2, C. Vendor’s Pending Litigation and Judgments (Proposer’s SOQ Section A.3)</b>		
Exhibit 17: Prospective Contractor Pending Litigation and Judgments (Section A.3 of SOQ)		<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>RFSQ, Paragraph 2.7.2, D. Vendor’s Financial Viability (Proposer’s SOQ Section A.4)</b>		
Vendor furnished copies of the company’s most current and prior two (2) fiscal years.		<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>RFSQ, Paragraph 2.7.3, REQUIRED FORMS (Proposer’s SOQ, Section B )</b>		
Exhibit 3: Certification of No Conflict of Interest		<input type="checkbox"/> Yes <input type="checkbox"/> No
Exhibit 4: Vendor’s EEO Certification		<input type="checkbox"/> Yes <input type="checkbox"/> No
Exhibit 6: Familiarity with the County Lobbyist Ordinance Certification		<input type="checkbox"/> Yes <input type="checkbox"/> No
Exhibit 10: Attestation of Willingness to Consider GAIN/GROW Participants		<input type="checkbox"/> Yes <input type="checkbox"/> No
Exhibit 11: County of Los Angeles Contractor Employee Jury Service Program Certification		<input type="checkbox"/> Yes <input type="checkbox"/> No
Exhibit 12: Charitable Contributions Certification		<input type="checkbox"/> Yes <input type="checkbox"/> No
Exhibit 13: Certification of Compliance with the County’s Defaulted Property Tax Reduction		<input type="checkbox"/> Yes <input type="checkbox"/> No
Exhibit 14: Zero Tolerance Policy on Human Trafficking Certification		<input type="checkbox"/> Yes <input type="checkbox"/> No
Exhibit 15: Vendor’s Compliance with Encryption Requirements		<input type="checkbox"/> Yes <input type="checkbox"/> No
Exhibit 18: Acceptance of Terms and Conditions		<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>RFSQ, Paragraph 2.7.4, PROOF OF INSURABILITY (Proposer’s SOQ Section C)</b>		
Vendor furnished a copy of Certificate of Insurance (ACCORD or equivalent form) or a letter from a qualified insurance carrier indicating a willingness to provide the required coverage.		<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>COMMERCIAL GENERAL LIABILITY</b>		
General Aggregate: \$2 million		<input type="checkbox"/> Yes <input type="checkbox"/> No
Products/Completed Operations Aggregate: \$1 million		<input type="checkbox"/> Yes <input type="checkbox"/> No
Personal and Advertising Injury: \$1 million		<input type="checkbox"/> Yes <input type="checkbox"/> No
Each Occurrence: \$1 million		<input type="checkbox"/> Yes <input type="checkbox"/> No

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<b>AUTO LIABILITY</b>	
Auto Liability: \$1 million	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>WORKERS' COMPENSATION</b>	
Each Accident: \$1 million	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>PROFESSIONAL LIABILITY</b>	
Not less than \$1 million per claim and \$2 million aggregate	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>RFSQ, Paragraph 2.7.5, PROOF OF LICENSES (Proposer's SOQ Section D)</b>	
Vendor furnished a copy of all applicable licenses, certificates, accreditation, and permits for the provision of services for which they intend to qualify which include but are not limited to: a valid Business License	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>VENDOR SUPPLIED</b>	
Vendor hand-delivered or sent by a delivery services the original SOQ in an enclosed in a sealed envelope or box, plainly marked in the upper left-hand corner with the name and address of the Vendor and bear the words: "SOQ FOR MEDIA SERVICES" -OR- Vendor PDF scanned the original SOQ and electronically submitted with the above subject line to: Contract and Grants Division E-mail address: <a href="mailto:Contracts-Grants@ph.lacounty.gov">Contracts-Grants@ph.lacounty.gov</a>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Comments:</b>	
SIGNATURE	DATE
PRINT SIGNATOR'S NAME	TITLE
ADDRESS	CITY, STATE