

**COUNTY OF LOS ANGELES - DEPARTMENT OF PUBLIC HEALTH
CALFRESH HEALTHY LIVING PROGRAM REQUEST FOR PROPOSALS (RFP)
PROPOSER'S SUBMISSION CHECKLIST**

The purpose of this document is to ensure proposer has submitted all applicable sections, forms, exhibits, attachments, etc. with its proposal. Please check the appropriate box(es).

Additionally, proposer is encouraged to complete the attached optional Proposer Survey Questionnaire, Appendix V - Attachment A.

PROPOSER'S NAME (Legal Full Name):	Identify Funding Category(ies): <input type="checkbox"/> Category 1: Early Childcare and Education <input type="checkbox"/> Category 2: K-12 School and Afterschool Programs <input type="checkbox"/> Category 3: Healthcare Clinics <input type="checkbox"/> Category 4: Food Banks/Pantries <input type="checkbox"/> Category 5: Produce Distribution <input type="checkbox"/> Category 6: Nutrition Education and Physical Activity
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RFP Reference, Section 7.8, Preparation of the Proposal

Proposer supplied one original unbound , SINGLE-SIDED proposal marked "Original" on the proposal's Title Page.	Included <input type="checkbox"/> Yes
Proposer supplied four (4) DOUBLE-SIDED professionally bound OR a three-ring binder with copies of the original proposal marked "Copy" on the proposals' Title Page.	<input type="checkbox"/> Yes
Proposal and all copies are clearly labeled with RFP title: "County of Los Angeles, Department of Public Health Request for Proposals for PROPOSAL FOR CALFRESH HEALTHY LIVING PROGRAM RFP No. 2019-008, FUNDING CATEGORY (INCLUDE CATEGORY NUMBER) : (INCLUDE FUNDING CATEGORY NAME) "	<input type="checkbox"/> Yes

**RFP Reference, Section 7.9, Proposal Format (Revised)
(Note: 7.9 was revised via Addendum 4.)**

7.9.1	Title Page	<input type="checkbox"/> Yes
7.9.2	Cover Letter	<input type="checkbox"/> Yes
7.9.3	<ul style="list-style-type: none"> • Appendix V: Proposer's Submission Checklist and Appendix V – Attachment A, Proposer Survey Questionnaire 	<input type="checkbox"/> Yes
	<ul style="list-style-type: none"> • Exhibit 2: Proposer's Affidavit of Adherence to Minimum Mandatory Requirements 	<input type="checkbox"/> Yes
	<ul style="list-style-type: none"> • Appendix T: Certification of Non-Acceptance of Tobacco Funds 	<input type="checkbox"/> Yes

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7.9.4	Table of Contents	<input type="checkbox"/> Yes
7.9.5	Executive Summary (Section A)	<input type="checkbox"/> Yes
7.9.6	<p>Proposer's Organization Questionnaire/Affidavit and CBE Information and Required Supporting Documentation:</p> <ul style="list-style-type: none"> • Exhibit 1: Proposer's Organization Questionnaire/Affidavit and CBE Information and Required Support Documents: <p>A. Proposer furnished the following Required Support Documents:</p> <p>1. Corporations or Limited Liability Company (LLC):</p> <ol style="list-style-type: none"> 1) A copy of "Certificate of Good Standing" with the state of incorporation/organization 2) A conformed copy of "Statement of Information" as filed with the California Secretary of State listing corporate officers or members and managers <p>2. Limited Partnership:</p> <p>A conformed copy of the Certificate of Limited Partnership or Application for Registration of Foreign Limited Partnership as filed with the California Secretary of State, and any amendments</p>	<p><input type="checkbox"/>Yes</p> <p><input type="checkbox"/>Yes <input type="checkbox"/>N/A</p> <p><input type="checkbox"/>Yes <input type="checkbox"/>N/A</p> <p><input type="checkbox"/>Yes <input type="checkbox"/>N/A</p>
7.9.7	<p>Proposer's Qualifications (Section B)</p> <p>A. Proposer's Background and Experience (Section B-1)</p>	<input type="checkbox"/> Yes
	<p>B. Proposer's References (Section B-2)</p> <p>Exhibit 3: Prospective Contractor References</p> <p>Exhibit 4 (Revised): Prospective Contractor List of Contracts</p> <p>Exhibit 5 (Revised): Prospective Contractor List of Terminated Contracts</p> <p>Appendix Q (Revised): Site Eligibility Documentation</p>	<p><input type="checkbox"/>Yes</p> <p><input type="checkbox"/>Yes</p> <p><input type="checkbox"/>Yes</p> <p><input type="checkbox"/>Yes</p>

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7.9.7 (Continued)	<p>C. Proposer's Pending Litigation and Judgments (Section B-3)</p> <p>Exhibit 6: Prospective Contractor Pending Litigation and Judgments <input type="checkbox"/> Yes</p> <p>D. Financial Capability (Section B-4)</p> <p>Proposer provided copies of the organization's annual financial statements issued for the last three (3) years. <input type="checkbox"/> Yes</p>	
7.9.8	<p>Proposer's Approach to Provide Required Services (Section C)</p> <ul style="list-style-type: none"> ➤ Category 1: Early Childcare and Education <input type="checkbox"/> Yes <input type="checkbox"/> N/A ➤ Category 2: K-12 School and Afterschool Programs <input type="checkbox"/> Yes <input type="checkbox"/> N/A ➤ Category 3: Healthcare Clinics <input type="checkbox"/> Yes <input type="checkbox"/> N/A ➤ Category 4: Food Banks/Pantries <input type="checkbox"/> Yes <input type="checkbox"/> N/A ➤ Category 5: Produce Distribution <input type="checkbox"/> Yes <input type="checkbox"/> N/A ➤ Category 6: Nutrition Education and Physical Activity <input type="checkbox"/> Yes <input type="checkbox"/> N/A 	
7.9.9	<p>Proposed Budget and Budget Justification (Section D)</p> <ul style="list-style-type: none"> ➤ Category 1: Early Childcare and Education <input type="checkbox"/> Yes <input type="checkbox"/> N/A ➤ Category 2: K-12 School and Afterschool Programs <input type="checkbox"/> Yes <input type="checkbox"/> N/A ➤ Category 3: Healthcare Clinics <input type="checkbox"/> Yes <input type="checkbox"/> N/A ➤ Category 4: Food Banks/Pantries <input type="checkbox"/> Yes <input type="checkbox"/> N/A ➤ Category 5: Produce Distribution <input type="checkbox"/> Yes <input type="checkbox"/> N/A ➤ Category 6: Nutrition Education and Physical Activity <input type="checkbox"/> Yes <input type="checkbox"/> N/A 	
7.9.10	Proposer's Quality Control Plan (Section E)	<input type="checkbox"/> Yes
7.9.11	Proposer's Green Initiatives (Section F)	<input type="checkbox"/> Yes

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7.9.12	<p>Terms and Conditions in Sample Contract, and Requirements of the SOW: Acceptance of/or Exceptions to (Section G)</p> <p>Proposer submitted:</p> <p>Exhibit 25: Acceptance of Terms and Conditions Affirmation Form</p> <p>OR</p> <p>A statement listing the Proposer's exceptions to terms and conditions listed in Appendix B (Sample Contract) <u>or</u> Appendix A (Scopes of Work)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> N/A</p>
7.9.13	<p>Proposal Required Forms (Section H)</p> <p>Exhibit 7: Certification of No Conflict of Interest</p> <p>Exhibit 8: Familiarity with the County Lobbyist Ordinance Certification</p> <p>Exhibit 10: Proposer's Equal Employment Opportunity (EEO) Certification</p> <p>Exhibit 11: Attestation of Willingness to Consider GAIN/GROW Participants</p> <p>Exhibit 12: County of Los Angeles Contractor Employee Jury Service Program Certification Form and Application for Exception</p> <p>Exhibit 21: Charitable Contributions Certification</p> <p>Exhibit 23: Certification of Compliance with the County's Defaulted Property Tax Reduction Program</p> <p>Exhibit 26: Zero Tolerance Policy on Human Trafficking Certification</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> Yes</p>

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	Exhibit 27: Proposer's Compliance with Encryption Requirements	<input type="checkbox"/> Yes
	Exhibit 28: Compliance with Fair Chance Employment Practices	<input type="checkbox"/> Yes
	Exhibit 29: Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion – Lower Tier Covered Transactions	<input type="checkbox"/> Yes

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Proposer Survey Questionnaire
Optional Survey: Your feedback is greatly appreciated.

**Proposer Name
(Optional):**

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How did your agency learn about this contracting opportunity with the County of Los Angeles Department of Public Health? Please check box(es) that apply.

❖ Social Media (e.g., Twitter, Facebook, etc.)	<input type="checkbox"/> Yes
❖ Department of Public Health Workshop	<input type="checkbox"/> Yes
❖ County Vendor Fair	<input type="checkbox"/> Yes
❖ Contracting Opportunity flyer	<input type="checkbox"/> Yes
❖ Email Notification	<input type="checkbox"/> Yes
❖ Website (Department of Public Health Contracts and Grants)	<input type="checkbox"/> Yes
❖ Other Website (<i>Please describe below</i>):	<input type="checkbox"/> Yes
❖ Other (<i>Please describe below</i>):	<input type="checkbox"/> Yes

Thank you!