



Maine Township High School District 207

Dr. Kenneth Wallace
Superintendent

Administration Center
1177 South Dee Road
Park Ridge, Illinois 60068-4398
(847) 696-3600
www.Maine207.org

INSTRUCTIONS

GENERAL

- A. The Board of Education and Maine Township High School District 207 will receive proposals for **Graduation Commencement Pictures**.
- B. To receive full consideration, proposal must contain the following documents properly completed and signed.
 1. Proposal Form
 2. Certificate of Compliance with Illinois Drug-Free Act
 3. Certificate of Compliance with Illinois Human Rights Workplace Act

PREPARATION OF PROPOSAL

- A. Proposals to be entitled for consideration must be made in accordance with the following instructions.
 1. Submit one copy of proposal on forms provided with all blank spaces for prices filled in, with ink pen, or typewritten.
 2. Submit proposal in an opaque, sealed envelope, addressed to:

Ms. Patricia Alvarez
Director of Fiscal Services
Maine Township High School District 207
1177 South Dee Rd
Park Ridge, IL 60068

Envelope should be labeled: ***Proposal for Graduation Commencement Pictures w/name of Vendor***

3. Proposals will be received until 10:00 AM., prevailing time on Monday, November 20, 2023, at the Business Office of Maine Township High School District 207. Proposals received after this time will not be accepted.
 4. Fill in all blank spaces for the proposal items with prices, or if not applicable, the words "No Quote."
- B. The Owner reserves the right to reject any or all proposals or parts thereof at its sole discretion.
- C. The Owner reserves the right to waive any or all irregularities or informalities.

SCOPE OF WORK

The successful vendor must:

- Set up picture area at the 3 graduation ceremonies for Maine East, Maine South and Maine West. All 3 schools perform graduation ceremonies on the same day and the ceremonies are currently held at the Rosemont Theatre. The graduation date for 2024 has been set for Sunday, May 19, 2024. The dates for 2025 and 2026 will be set and established in the future.
- Mail, text and/or email each graduate photographed a photo proof following graduation, along with a list of photo packages. Students are under no obligation to purchase.
- Protect the student's right to privacy by not selling or providing names and addresses of the students to any other entities.

Each school will provide student information at least four weeks before graduation. The District at its option can renew at the prices provided in years two and three.

PROPOSAL REQUIREMENTS

- A. All Vendors' proposals shall be expressly based on the following items.
1. Instructions to Vendors
 2. Proposal Form
 3. Specifications
 4. List of all customers currently being supplied with comparable items for the last two years. List should include a contact person and telephone number.
- B. Any Contract resulting from the Proposal Documents will incorporate the terms and provisions of said documents. It is intended that these Proposal Documents shall prevail over conflicting terms and conditions of Contractor's proposal. Vendor's printed terms and conditions are **NOT** considered as exceptions to the Contract.

OTHER CERTIFICATIONS AND SUBMITTALS

- A. All Vendors must complete and sign the following certifications and submit them with their proposals. **FAILURE TO DO SO MAY RESULT IN DISQUALIFICATION.**
1. Bidder Eligibility Certification and Non-Collusion Affidavit
 2. Certificate of Compliance with Illinois Human Rights Act
 3. Certificate of Compliance with Illinois Drug-Free Workplace Act

EMPLOYMENT AND LABOR PROVISIONS

- A. In the employment and use of labor, the Contractor and his subcontractors shall conform to the Illinois Statutory requirements regarding labor and wages.
- B. Vendors / Contractors must conform to all Federal, State, Local, and OSHA regulations now in effect.

**MAINE TOWNSHIP HIGH SCHOOL DISTRICT 207
1177 SOUTH DEE RD
PARK RIDGE, IL 60068**

Name of Vendor _____

To: Maine Township High School District 207
Attn: Patricia Alvarez -Director of Fiscal Services
1177 South Dee Rd
Park Ridge, IL 60068

Selection Process

Selection and award of this contract / proposal will be made by January 8, 2024.

Selection is based upon the following criteria:

- Price
- Rebates provided
- Quality of services provided

Other

Maine Township High School District 207 reserves the right to accept or reject any or all proposals, to waive irregularities and accept proposal that is in the best interest of the district.

Vendor is required to submit the following:

1. List of all customers who have had similar service. List should include a contact person and telephone number.
2. Certificate of Compliance with Illinois Drug-Free Act
3. Certificate of Compliance with Illinois Human Rights Workplace Act

Signature of Seller, the official
Representative of the Company

Date: _____, 20_____

**CERTIFICATE OF COMPLIANCE WITH
ILLINOIS DRUG-FREE WORKPLACE ACT**

_____ Contractor, having 25 employees, does hereby certify pursuant to Section 3 of the Illinois Drug-Free Workplace Act (30ILCS 580/3) that [he, she, it] shall provide a drug-free workplace for all employees engaged in the performance of work under the Contract by complying with the requirements of the Illinois Drug-Free Workplace Act and, further certified, that [he, she, it] is not ineligible for award of this Contract by reason of debarment for a violation of the Illinois Drug-Free Workplace Act.

Firm Name:

By _____
(Authorized Agent of Contractor)

**CERTIFICATE OF COMPLIANCE
ILLINOIS HUMAN RIGHTS ACT**

_____, Contractor, does hereby certify pursuant to Section 2-105 of the Illinois Human Rights Act, (775 ILCS 5/2-105) that [he, she, it] has adopted a written sexual harassment policy that includes at a minimum the following information: (i) the illegality of sexual harassment; (ii) the definition of sexual harassment under Illinois law; (iii) a description of sexual harassment, utilizing examples; (iv) an employer's internal complaint process, including penalty; (v) the legal recourse, investigative and complaint process available through the Department of Human Rights Commission; (vi) directions on how to contact the Department and Commission; and (vii) protection against retaliation as provided by Section 6-101 of the Illinois Human Rights Act.

Firm Name:

By _____
(Authorized Agent of Contractor)

**PROPOSAL FORM
GRADUATION PICTURES
MAINE TOWNSHIP HIGH SCHOOL DISTRICT 207**

Please attach price list for 2024.

Price increase percentage for 2025 _____

Price increase percentage for 2026 _____

REBATES/INCENTIVES (if any) _____
(Guaranteed yearly commissions) _____

Printed Name

Title

Signature

Date

Telephone

Email

*Illinois School Code ILCS5/10-17

Complete and return via fax to 847-696-3254 or email to igarcia@maine207.org

Vendor Information

Type of Vendor: Business Small Business Government Agency Government Agency
 Other Not-for-Profit Organization

Name: _____ Certifying Entity _____

Phone Number: _____ Fax Number: _____

E-Mail (Used for PO Submissions): _____

Business Classification (if applicable)*: Minority Owned Female Owned
 Owned by Persons with Disabilities Veteran Owned

* In accordance with Illinois School Code (105 ILCS 5/10-17), schools are required to publish an annual report identifying the total number of contracts awarded to minority, female, veteran, small business, or disabled contractors/vendors, as certified by a certifying agency (e.g. Cook County, State of Illinois, U.S. Small Business Association) in accordance with the definitions provided in 30 ILCS 575/2.

Mailing Address

Street Address: _____

City: _____ State: _____ Zip Code: _____

Remittance Mailing Address (if different than above)

Street Address: _____

City: _____ State: _____ Zip Code: _____

Tax Payer Identification

This section does not need to be completed if a W-9 form is attached. Please refer to IRS form W-9 for guidance if necessary.

Tax Classification: Individual/Sole Proprietor or single-member LLC C - Corporation S - Corporation
 P - Partnership Trust/Estate Limited Liability Company (Insert Type): _____
 Other: _____

Federal Tax ID Number: _____ or Social Security Number: _____

Payment Processing Instructions

Would you like to sign-up for electronic payments (ACH)? Yes No

Complete ACH vendor Authorization form located on our website. www.maine207.org. Complete and return via FAX to 847-696-3254.

Under penalties of perjury, I certify that the information provided on this form is complete and accurate. I understand that this information will be utilized for local, federal and state reporting purposes. I further certify that I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding.

Printed Name of Vendor Representative: _____

Vendor Representative Signature: _____

Date: _____