



**HUDSON COUNTY  
IMPROVEMENT  
AUTHORITY**

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**REQUEST FOR PROPOSALS**

**FOR**

**CERTIFIED MEDICAL BILLING AND CODING SERVICES  
AND RELATED HEALTH CARE FINANCIAL SERVICES**

**PROPOSAL DUE DATE  
Thursday May 7, 2020 at 4 P.M.. EST**

The Hudson County Improvement Authority (the “**HCIA**”) is conducting due diligence regarding the acquisition of certain property including property currently occupied by CarePoint Health Bayonne Medical Center, Bayonne, New Jersey. It is the intent of this RFP to have the successful medical billing and coding and health care financial services firm enter into a Contract for Professional Services with the HCIA to provide the services as outlined herein.

This RFP is designed to find qualified service providers in a Fair and Open Public Solicitation established pursuant to P.L. 2004, c. 19 (N.J.S.A. 19:44A-20.4 et seq.) for the provision of professional services contract based on qualifications, merit and cost effectiveness. The general requirements set forth below must be met in order for any proposer to be considered to provide the professional services, which are exempt from public bidding pursuant to N.J.S.A. 40A:11-5 et seq.

All proposals are prepared at the cost and expense of the prospective firm (“**Respondent(s)**”). The HCIA is not responsible for paying for any of the costs or expenses associated with the preparation or submission of proposals.

Any successful Respondent is required to comply with requirements of the Law Against Discrimination, P.L. 1975, Ch. 127, N.J.S.A. 10:5-31, et seq., the Affirmative Action Rules, N.J.A.C. 17:27-1.1, et seq., and the Americans with Disabilities Act of 1990, 42 USC §2101, et seq.

Respondents and their subcontractors must at all times comply with all applicable obligations pursuant to The New Jersey Campaign Contributions and Expenditure Reporting Act, N.J.S.A. 19:44A-1, et seq., and any local or municipal restrictions adopted in accordance with said Act.

This RFP constitutes an invitation to submit proposals to the HCIA, and does not represent an offer, obligation or agreement on the part of the HCIA. The HCIA reserves the right to protect the best interests of the HCIA and the City, and to accept the proposal that, in the HCIA's sole judgment, provides the most qualified professional services through costs and fees that are fair and reasonable, in terms of the HCIA's budget, the general market rate for the requested services, and the level of experience, breadth of services, and expertise of the proposer.

The HCIA reserves the right to waive any technical errors, to reject any proposal (or any part thereof) for any reason whatsoever, or to reject all proposals. The HCIA reserves the right at any time to withdraw this RFP. In addition, the HCIA retains the right to make modifications or additions to the RFP.

Questions or inquiries regarding this RFP should be directed via email, to Michael O'Connor, Deputy General Counsel at the HCIA:

Hudson County Improvement Authority  
830 Bergen Street, 9<sup>th</sup> Floor  
Jersey City, New Jersey 07302  
Email: [michaelo@hcia.org](mailto:michaelo@hcia.org)

Respondents are required to submit any written questions to the HCIA regarding the RFP and its attachments, no later than Monday, May 4, 2020. This deadline for questions is intended to permit the HCIA sufficient time to issue an Addendum, if appropriate, without disrupting the procurement

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schedule. Consequently, Respondents are cautioned that questions submitted after the question deadline may not be accepted.

Both the questions and responses will be posted on the HCIA's website at <http://www.hcia.org>. Respondents should check the website periodically for updates to the RFP as well as any questions/responses posted.

**All proposals must be delivered, electronically only, to the HCIA by the Thursday, May 7, 2020 Submission Date set forth on the cover of this RFP. Responses submitted after 4:00 p.m. EST on the Submission Date will not be accepted. Responses must be submitted electronically, via email, to: Norman Guerra, CEO at [norman@hcia.org](mailto:norman@hcia.org), with a copy to Michael O'Connor, Deputy General Counsel at [michaelo@hcia.org](mailto:michaelo@hcia.org) in a single PDF, with "SUBMISSION FOR CERTIFIED MEDICAL BILLING AND CODING SERVICES AND RELATED HEALTH CARE FINANCIAL SERVICES" in the subject line thereof.**

Submissions should consist of 1 PDF document, containing all the requested information and documentation.

All proposals will become the property of the HCIA and will not be returned to the Respondent.

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# MISSION STATEMENT

The Hudson County Improvement Authority (HCIA) was created in September 1974 by the Hudson County Board of Chosen Freeholders under, and by virtue of, the County Improvement Authorities Law as amended and supplemented. The HCIA is governed by a Board of Commissioners whose members are appointed by the Hudson County Executive and confirmed by the County's Board of Chosen Freeholders.

The HCIA provides strategic planning and coordination of public policy initiatives on behalf of Hudson County municipalities and residents. The authority is responsible for a vast range of services, which include low interest financing for public and private initiatives, solid waste management, environmental education, recycling and transportation management, recreation services, and alternative energy initiatives.

**Our Mission:** To provide a wide range of services to residents and businesses of Hudson County at the least cost to taxpayers.

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## **SECTION 1. GENERAL CRITERIA**

The HCIA desires to appoint a medical billing and coding expert who has the experience, ability and resources to provide medical billing and coding services and related health care financial services, as well as generally accepted auditing and accounting principles necessary to attain successful results. The procedures will be performed in accordance with Generally Accepted Auditing Standards (GAAS) and the standards applicable to financial audits contained in the Government Auditing Standards (GAGAS) 48 CFR 31, 23 U.S.C. 112 as issued by the Comptroller General of the United States.

## **SECTION 2. MANDATORY MINIMUM REQUIREMENTS**

- Provide the HCIA with a project plan detailing the approach to completing the services sought herein.
- Provide a brief description of your firm. You must include the most recent Peer Review opinion of your firm with the proposal.
- List the education and experience of the project engagement Manager and/or Partner-in-charge that will be responsible for managing the on-site staff and ensuring quality and schedule goals are met.
- Provide a detailed summary of the firm's recent experience providing medical billing and coding and related health care financial services to a public agency or healthcare law firm.
- Name a minimum of three (3) clients for references with telephone numbers, contact person and dates of engagements.
- Resumes of the Manager and/or the Partner assigned.
- Describe the firm's experience in medical billing and coding and reviewing and developing hospital audits.
- Provide your cost proposal and list the employees to be assigned to this project by name, title, all-inclusive allowable hourly rate. Failure to quote the contract rates will be immediate grounds to reject your proposal.
- Must maintain an office within a reasonable distance from the HCIA's offices.
- Provide brief statement whether within the last ten (10) years, a Medicaid managed care contract: (1) terminated or not renewed for non-performance or poor performance and/or (2) terminated on a voluntary basis prior to the contract end date. The Respondent must provide the name and contact information of the lead program manager of the contracting entity.
- Must be willing to commit on average, a minimum of twenty (20) hours per week to attend various HCIA meetings as determined and assigned by the Chief Executive Officer.
- Must have sufficient support staff available to provide services required by the HCIA

## **SECTION 3. INSURANCE REQUIREMENTS**

Prior to commencing work under contract, the successful firm shall furnish the HCIA with a certificate of insurance as evidence that it has procured the insurance coverage required herein. A carrier approved by the HCIA must provide the coverage. Firms must give the HCIA a sixty (60) day notice of cancellation, non-renewal, or change in insurance coverage. The

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successful firm(s) shall provide and maintain the following minimum limits of insurance coverage during the period of performance required under the contract resulting from this Request for Qualifications:

**PROFESSIONAL LIABILITY**

Minimum of \$1,000,000.00 errors and omissions per occurrence to be amended based upon the specific work and values involved.

**WORKERS COMPENSATION AND EMPLOYERS' LIABILITY**

- Statutory coverage for New Jersey
- \$100,000.00 Employer's Liability

**GENERAL LIABILITY**

Minimum of \$1,000,000 per occurrence to be amended based upon the specific work and values involved. The HCIA shall be named as an additional insured with respect to general liability.

**AUTOMOBILE LIABILITY**

Minimum of \$1,000,000 per occurrence/\$1,000,000 aggregate. This coverage is required if the operation of any vehicle is required in the performance of the services detailed herein (including but not limited to the use of a vehicle to make any on-site visits).

**INDEMNIFICATION**

The Respondent shall defend, indemnify and hold harmless the HCIA, its officers, agents and employees from any and all claims and costs of any nature. Whether for personal injury, property damage, or other liability arising out of or in any way connects with the firm's acts or omissions under this agreement.

**SECTION 4. OTHER GENERAL TERMS AND CONDITIONS**

**Mandatory Affirmative Action Compliance**

During the performance of the Contract hereunder, the Respondent shall be required to comply with the requirements of N.J.S.A. 10:5-31 et seq. and N.J.A.C. 17:27. Specifically, the Respondent shall not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status or sex. The Respondent shall be required to take affirmative action to ensure that such applicants are recruited and employed, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status or sex. Such action shall include, but not be limited to the following: employment, upgrading, demotion or transfer; recruitment or recruitment advertising, layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The

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Respondent shall post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting forth provision of this non-discrimination clause.

The Respondent shall in all solicitations or advertisements for employees placed by or on behalf of the Respondent, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status or sex.

If applicable, the Respondent shall send to each labor union or representative of workers with which it has collective bargaining agreement or other contract or understanding, a notice to be provided by the agency contracting officer advising the commitments under this Act and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

The Respondent shall comply with the regulations promulgated by the New Jersey State Treasurer pursuant to N.J.S.A. 10:5-31 et seq., as amended and supplemented from time to time.

The Respondent shall attempt in good faith to employ minority and female workers consistent with the applicable county employment goals prescribed by N.J.A.C. 17:27-5.2 promulgated by the Treasurer pursuant to N.J.S.A. 10:5-31 et seq., as amended and supplemented from time to time or in accordance with a binding determination of the applicable county employment goals determined by the Affirmative Action Officer pursuant to N.J.A.C. 17:27-5.2 promulgated by the Treasurer pursuant to N.J.S.A. 10:5-31 et seq., as amended and supplemented from time to time.

The Respondent shall inform in writing appropriate recruiting agencies in the area, including employment agencies, placement bureaus, colleges, universities, labor unions, that it does not discriminate on the basis of age, creed, color, national origin, ancestry, marital status or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices.

The Respondent shall review all procedures relating to transfer, upgrading, downgrading and layoff to ensure that all such actions are taken without regard to age, creed, color, national origin, ancestry, marital status or sex, and conform with the applicable employment goals, consistent with the statutes and court decisions of the State of New Jersey, and applicable Federal law and applicable Federal court decisions.

The Respondent shall furnish such reports or other documents to the Affirmative Action Office as may be requested by the office from time to time in order to carry out the purposes of these regulations, and public agencies shall furnish such information as may be requested by the Affirmative Action Office for conducting a compliance investigation pursuant to Subchapter 10 of the Administrative Code (N.J.A.C. 17:27).

The successful Respondent shall furnish, within 3 days of the notice of intent to award or the signing of the Contract hereunder, one of the following to the HCIA:

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1. Evidence of an existing, federally approved or sanctioned affirmative action program  
or
  2. A certificate of Employee Information Report Approval  
or
  3. A completed Employee Information Report (AA302).

### **Americans with Disabilities Act**

The Respondent shall also be required to comply with the provisions of the Americans With Disabilities Act (42 U.S.C. 12101 et seq.), as amended from time to time. The Respondent shall not discriminate against disabled persons in any aspect of employment inclusive of the application process, hiring, training, advancement and wages, benefits or employer-sponsored social activities.

### **SECTION 5. FEE SCHEDULE**

The proposed fee schedule shall include cost details, including the hourly rates of each of the individuals who will perform services, and all expenses.

### **SECTION 6. TERM OF CONTRACT**

The contract period for the successful firm will be from date of award for 1 year. The contract may be terminated by either party with 60 days' prior written notice.

### **SECTION 7. ORAL PRESENTATION/INTERVIEWS**

Firms submitting a proposal in response to this RFP may be required to give an oral presentation of their proposal. Additional technical and/or cost information may be requested for clarification purposes, but in no way will change the original proposal submitted. Interviews are optional and may or may not be conducted.

### **SECTION 8. SELECTION CRITERIA**

- Qualifications of the individuals who will perform the services/tasks and the amounts of their respective participation
- Experience, references and reputation in the field. Knowledge of the HCIA and the subject matter to be addressed under the contract
- Ability to perform the services/tasks in a timely fashion, including staffing and familiarity with the subject matter. Availability to accommodate any required meetings.
- Ability of Respondent to meet or exceed the requirements defined in the RFP.
- Cost consideration – including, but not limited to, historical costs for similar professional services, expertise involved and comparable costs for comparable public entities.
- Other factors if determined to be in the best interest of the HCIA.



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**RESPONDENT'S CHECKLIST**

This Respondent's Checklist lists each of the items required to be submitted with the proposal, and a place for the Respondent to indicate, by initialing each entry, that the Respondent has included those required items with the completed proposal. Each Respondent shall complete this form, and submit it with the proposal, in addition to those documentary and informational forms, certificates and other documents that are listed.

**Initials:**

1. \_\_\_\_\_ Written proposal
2. \_\_\_\_\_ Certificate of Liability Insurance (Attachment A)
3. \_\_\_\_\_ Conflict of Interest Certification (Attachment B)
4. \_\_\_\_\_ Proposal Certification (Attachment C)
5. \_\_\_\_\_ Ownership Disclosure Statement (Attachment D)
6. \_\_\_\_\_ Non-Collusion Affidavit (Attachment E)
7. \_\_\_\_\_ Acknowledgment of Receipt of Addenda (Attachment F)
8. \_\_\_\_\_ Disclosure of Contributions to NJ Election Law Enforcement Commission (Attachment G)
9. \_\_\_\_\_ Investment in Iran Disclosure Form (Attachment H)
10. \_\_\_\_\_ MacBride's Principles Form (Attachment I)
11. \_\_\_\_\_ Business Registration Certificate
12. \_\_\_\_\_ Certificate of Employee Information Report
13. \_\_\_\_\_ This Respondent's Checklist

\_\_\_\_\_  
Respondent's Signature

\_\_\_\_\_  
Name of Respondent Printed or Typed

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**ATTACHEMENT A**

**CERTIFICATION OF INSURANCE**

I HEREBY CERTIFY THAT MY OFFICE CARRIES INSURANCE ADEQUATE TO PROTECT THE HUDSON COUNTY IMPROVEMENT AUTHORITY (“HCIA”) AND INDEMNIFY THE HCIA FOR ANY ERROR OR OMISSION COMMITTED BY THE UNDERSIGNED THAT CREATES LIABILITY TO THE HCIA. THIS INCLUDES ERRORS AND OMISSIONS POLICY AND ANY OTHER TYPE OF POLICY THAT CAN BE UTILIZED TO PROTECT THE INTERESTS OF THE HCIA. I HAVE ATTACHED COPIES OF THE DECLARATION PAGES OF EACH POLICY THAT DOES OR CAN PROTECT THE HCIA FROM ANY ERROR, OMISSION OR ACTIVITY IN WHICH I OR ANYONE FROM MY OFFICE MIGHT ENGAGE IN ON BEHALF OF THE HCIA.

I FURTHER CERTIFY THAT THE POLICIES OF INSURANCE THAT ARE CARRIED BY MY OFFICE SHALL CONTINUE TO BE CARRIED DURING THE ENTIRE TERM OF MY APPOINTMENT AS SOLICITOR, IN THE EVENT THAT MY OFFICE IS SELECTED TO SERVE IN THAT CAPACITY. IN THE EVENT THAT THE DECLARATIONS PAGE(S) SUBMITTED SHOWS THE POLICY OR POLICIES OF INSURANCE WILL LAPSE DURING THE COURSE OF THE TERM OF MY APPOINTMENT, I WILL PROVIDE TO THE HCIA A COPY OF THE RENEWAL POLICY DECLARATION PAGE. I FURTHER CERTIFY THAT THE RENEWED POLICY SHALL HAVE THE SAME OR GREATER LIMITS OF LIABILITY AS THE ONE PROVIDED FOR AT THE BEGINNING OF MY APPOINTMENT.

CERTIFYING OFFICIAL:                      NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

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**ATTACHMENT B**

**CONFLICT OF INTEREST CERTIFICATION**

THE UNDERSIGNED CERTIFIES TO THE HUDSON COUNTY IMPROVEMENT AUTHORITY (“HCIA”), COUNTY OF HUDSON, STATE OF NEW JERSEY THAT IN PERFORMING SERVICES TO THE HCIA HE/SHE IS AWARE OF NO CIRCUMSTANCE THAT WOULD CONSTITUTE A CONFLICT OF INTEREST, FINANCIAL OR OTHERWISE, BETWEEN HIMSELF/HERSELF (OR HIS/HER FIRM) AND THE INTERESTS OF THE HCIA. THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS MADE A SEARCH OF HIS/HER FIRM’S CLIENT BASE AND HAS EXECUTED THIS CERTIFICATION SUBSEQUENT TO SUCH SEARCH.

THE UNDERSIGNED ACKNOWLEDGES THIS IS A CONTINUING CERTIFICATION, AND SHALL REMAIN IN EFFECT FOR THE TERM OF THE SERVICES CONTAINED IN THE SOLICITED REQUEST FOR PROPOSAL. I CERTIFY THAT THE FOREGOING STATEMENTS MADE BY ME ARE TRUE. I AM AWARE THAT IF ANY OF THE FOREGOING STATEMENTS MADE BY ME ARE FALSE, THE HCIA IS FREE TO TERMINATE ANY PROFESSIONAL SERVICE AGREEMENT ENTERED INTO WITH THE UNDERSIGNED AND/OR HIS OR HER FIRM.

Applicant Signature: \_\_\_\_\_

Typed Firm Name: \_\_\_\_\_

Title: \_\_\_\_\_

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



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**ATTACHMENT D**

**OWNERSHIP DISCLOSURE STATEMENT**

**STATEMENT OF OWNERSHIP DISCLOSURE**

N.J.S.A. 52:25-24.2 (P.L. 1977, c.33, as amended by P.L. 2016, c.43)

**This statement shall be completed, certified to, and included with all bid and proposal submissions. Failure to submit the required information is cause for automatic rejection of the bid or proposal.**

**Name of Organization:** \_\_\_\_\_

**Organization**

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

**Part I Check the box that represents the type of business organization:**

- Sole Proprietorship (skip Parts II and III, execute certification in Part IV)
- Non-Profit Corporation (skip Parts II and III, execute certification in Part IV)
- For-Profit Corporation (any type)     Limited Liability Company (LLC)
- Partnership     Limited Partnership     Limited Liability Partnership (LLP)
- Other (be specific): \_\_\_\_\_

**Part II**

- The list below contains the names and addresses of all stockholders in the corporation who own 10 percent or more of its stock, of any class, or of all individual partners in the partnership who own a 10 percent or greater interest therein, or of all members in the limited liability company who own a 10 percent or greater interest therein, as the case may be. **(COMPLETE THE LIST BELOW IN THIS SECTION)**

**OR**

- No one stockholder in the corporation owns 10 percent or more of its stock, of any class, or no individual partner in the partnership owns a 10 percent or greater interest therein, or no member in the limited liability company owns a 10 percent or greater interest therein, as the case may be. **(SKIP TO PART IV)**

(Please attach additional sheets if more space is needed):

Name of Individual or Business Entity	Home Address (for Individuals) or Business Address

**Part III DISCLOSURE OF 10% OR GREATER OWNERSHIP IN THE STOCKHOLDERS, PARTNERS OR LLC MEMBERS LISTED IN PART II**

If a bidder has a direct or indirect parent entity which is publicly traded, and any person holds a 10 percent or greater beneficial interest in the publicly traded parent entity as of the last annual federal Security and Exchange Commission (SEC) or foreign equivalent filing, ownership disclosure can be met by providing links to the website(s) containing the last annual filing(s) with the federal Securities and Exchange Commission (or foreign equivalent) that contain the name and address of each person holding a 10% or greater beneficial interest in the publicly traded parent entity, along with the relevant page numbers of the filing(s) that contain the information on each such person. **Attach additional sheets if more space is needed.**

Website (URL) containing the last annual SEC (or foreign equivalent) filing	Page #'s

**Please list** the names and addresses of each stockholder, partner or member owning a 10 percent or greater interest in any corresponding corporation, partnership and/or limited liability company (LLC) listed in Part II **other than for any publicly traded parent entities referenced above.** The disclosure shall be continued until names and addresses of every noncorporate stockholder, and individual partner, and member exceeding the 10 percent ownership criteria established pursuant to N.J.S.A. 52:25-24.2 has been listed. **Attach additional sheets if more space is needed.**

Stockholder/Partner/Member and Corresponding Entity Listed in Part II	Home Address (for Individuals) or Business Address

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**Part IV Certification**

I, being duly sworn upon my oath, hereby represent that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I acknowledge: that I am authorized to execute this certification on behalf of the bidder/proposer; that the Hudson County Improvement Authority is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the completion of any contracts with the Hudson County Improvement Authority to notify the Hudson County Improvement Authority in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecution under the law and that it will constitute a material breach of my agreement(s) with the, permitting the Hudson County Improvement Authority to declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print):		Title:	
Signature:		Date:	

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**ATTACHEMENT E**

**NON-COLLUSION AFFIDAVIT**

STATE OF NEW JERSEY:

SS:

COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_ of the \_\_\_\_\_ of \_\_\_\_\_ in the County of \_\_\_\_\_, and the State of New Jersey, of full age, being duly sworn according to the law on my oath, depose and say that:

I am \_\_\_\_\_ of the firm of \_\_\_\_\_ the Respondent submitting the proposal for the contract involving the provision of property management and social services to the Hudson County Improvement Authority, and that I executed the said proposal with full authority to do so; that said respondent has not, directly or indirectly, entered into an agreement, participated in any collusion, or otherwise taken any action in restraint of free, competitive process in connection with this procurement; and that all statements contained in said proposal and in this affidavit are true and correct, and made with full knowledge that the Hudson County Improvement Authority relied upon the truth of the statements contained in said proposal and in this affidavit in awarding the contract for the said proposal.

I further warrant that no person or selling agency has been employed or retained to solicit or secure such contract upon an agreement or understanding for a commission, percentage, brokerage, or contingent fees, except bona fide employees or bona fide established commercial or selling agencies maintained by \_\_\_\_\_.

(Name of Respondent)

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

Name of Signatory: \_\_\_\_\_

Title of Signatory: \_\_\_\_\_

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

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

Telephone: \_\_\_\_\_

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

Subscribed and Sworn to before me  
this \_\_\_\_ day of \_\_\_\_\_, 201\_\_.

\_\_\_\_\_  
Signature of Notary Public



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**ATTACHMENT F**

**ACKNOWLEDGMENT OF  
RECEIPT OF ADDENDA**

**HUDSON COUNTY IMPROVEMENT AUTHORITY  
ACKNOWLEDGMENT OF RECEIPT OF ADDENDA**

The undersigned Respondent hereby acknowledges receipt of the following Addenda:

<b><u>REFERENCE NUMBER OR TITLE OF ADDENDUM OR REVISION</u></b>	<b><u>Date Received</u></b>

**No addenda were received:**

Acknowledged for: \_\_\_\_\_  
(Name of Respondent)

By: \_\_\_\_\_  
(Signature of Authorized Representative)

Name: \_\_\_\_\_  
(Print or Type)

Title: \_\_\_\_\_

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

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## ATTACHMENT G

### C. 271 POLITICAL CONTRIBUTION DISCLOSURE FORM

Business entities (contractors) receiving contracts from a public agency that are NOT awarded pursuant to a “fair and open” process (defined at N.J.S.A. 19:44A-20.7) are subject to the provisions of P.L. 2005, c. 271, s.2 (N.J.S.A. 19:44A-20.26). This law provides that 10 days prior to the award of such a contract, the contractor shall disclose contributions to:

- any State, county, or municipal committee of a political party
- any legislative leadership committee<sup>\*</sup>
- any continuing political committee (a.k.a., political action committee)
- any candidate committee of a candidate for, or holder of, an elective office:
  - of the public entity awarding the contract
  - of that county in which that public entity is located
  - of another public entity within that county
  - or of a legislative district in which that public entity is located or, when the public entity is a county, of any legislative district which includes all or part of the county

The disclosure must list reportable contributions to any of the committees that exceed \$300 per election cycle that were made during the 12 months prior to award of the contract. See N.J.S.A. 19:44A-8 and 19:44A-16 for more details on reportable contributions.

N.J.S.A. 19:44A-20.26 itemizes the parties from whom contributions must be disclosed when a business entity is not a natural person. This includes the following:

- individuals with an “interest” ownership or control of more than 10% of the profits or assets of a business entity or 10% of the stock in the case of a business entity that is a corporation for profit
- all principals, partners, officers, or directors of the business entity or their spouses
- any subsidiaries directly or indirectly controlled by the business entity
- IRS Code Section 527 New Jersey based organizations, directly or indirectly controlled by the business entity and filing as continuing political committees, (PACs).

When the business entity is a natural person, “a contribution by that person’s spouse or child, residing therewith, shall be deemed to be a contribution by the business entity.” [N.J.S.A. 19:44A-20.26(b)] The contributor must be listed on the disclosure.

Any business entity that fails to comply with the disclosure provisions shall be subject to a fine imposed by ELEC in an amount to be determined by the Commission which may be based upon the amount that the business entity failed to report.

The enclosed list of agencies is provided to assist the contractor in identifying those public agencies whose elected official and/or candidate campaign committees are affected by the disclosure requirement. It is the contractor’s responsibility to identify the specific committees to which contributions may have been made and need to be disclosed. The disclosed information may exceed the minimum requirement.

The enclosed form, a content-consistent facsimile, or an electronic data file containing the required details (along with a signed cover sheet) may be used as the contractor’s submission and is disclosable to the public under the Open Public Records Act.

The contractor must also complete the attached Stockholder Disclosure Certification. This will assist the agency in meeting its obligations under the law. **NOTE: This section does not apply to Board of Education contracts.**

<sup>1</sup> N.J.S.A. 19:44A-3(s): “The term “legislative leadership committee” means a committee established, authorized to be established, or designated by the President of the Senate, the Minority Leader of the Senate, the Speaker of the

General Assembly or the Minority Leader of the General Assembly pursuant to section 16 of P.L.1993, c.65 (C.19:44A-10.1) for the purpose of receiving contributions and making expenditures.”

# C. 271 POLITICAL CONTRIBUTION DISCLOSURE FORM

Required Pursuant to N.J.S.A. 19:44A-20.26

**This form or its permitted facsimile must be submitted to the local unit no later than 10 days prior to the award of the contract.**

## SECTION 1. Part I – Vendor Information

Vendor Name:			
Address:			
City:	State:	Zip:	

The undersigned being authorized to certify, hereby certifies that the submission provided herein represents compliance with the provisions of N.J.S.A. 19:44A-20.26 and as represented by the Instructions accompanying this form.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

### 1.1 Part II – Contribution Disclosure

Disclosure requirement: Pursuant to N.J.S.A. 19:44A-20.26 this disclosure must include all reportable political contributions (more than \$300 per election cycle) over the 12 months prior to submission to the committees of the government entities listed on the form provided by the local unit.

Check here if disclosure is provided in electronic form.

Contributor Name	Recipient Name	Date	Dollar Amount
			\$

Check here if the information is continued on subsequent page(s)

**LIST OF HUDSON COUNTY ELECTED OFFICIALS AVAILABLE AT:**

<https://www.hudsoncountyclerk.org/elected-officials/#ElectedOfficials>





**ATTACHMENT H**

**RESPONDER'S DISCLOSURE – INVESTMENT IN IRAN**

STATE OF NEW JERSEY  
DEPARTMENT OF THE TREASURY, DIVISION OF PURCHASE AND PROPERTY  
33 WEST STATE STREET, P.O. BOX 230, TRENTON, NEW JERSEY 08625-0230

**DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN FORM**

SOLICITATION # \_\_\_\_\_

VENDOR/BIDDER: \_\_\_\_\_

**PART 1**  
**CERTIFICATION**

**VENDOR/BIDDER MUST COMPLETE PART 1 BY CHECKING ONE OF THE BOXES**  
**FAILURE TO CHECK ONE OF THE BOXES WILL RENDER THE PROPOSAL NON-RESPONSIVE**

Pursuant to Public Law 2012, c. 25, any person or entity that submits a bid or proposal or otherwise proposes to enter into or renew a contract must complete the certification below to attest, under penalty of perjury, that neither the person nor entity, nor any of its parents, subsidiaries, or affiliates, is identified on the Department of the Treasury's Chapter 25 list as a person or entity engaged in investment activities in Iran. The Chapter 25 list is found on the Division's website at <http://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf>. Vendors/Bidders **must** review this list prior to completing the below certification. **Failure to complete the certification will render a Vendor's/Bidder's proposal non-responsive.** If the Director of the Division of Purchase and Property finds a person or entity to be in violation of the law, s/he shall take action as may be appropriate and provided by law, rule or contract, including but not limited to, imposing sanctions, seeking compliance, recovering damages, declaring the party in default and seeking debarment or suspension of the party.

**CHECK THE APPROPRIATE BOX**

A. I certify, pursuant to Public Law 2012, c. 25, that neither the Vendor/Bidder listed above nor any of its parents, subsidiaries, or affiliates is listed on the N.J. Department of the Treasury's list of entities determined to be engaged in prohibited activities in Iran pursuant to P.L. 2012, c. 25 ("Chapter 25 List"). Disregard Part 2 and complete and sign the Certification below.

**OR**

B. I am unable to certify as above because the Vendor/Bidder and/or one or more of its parents, subsidiaries, or affiliates is listed on the Department's Chapter 25 list. I will provide a detailed, accurate and precise description of the activities in Part 2 below and sign and complete the Certification below. Failure to provide such information will result in the proposal being rendered as nonresponsive and appropriate penalties, fines and/or sanctions will be assessed as provided by law.

**PART 2**

**PLEASE PROVIDE ADDITIONAL INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN**

If you checked Box "B" above, provide a detailed, accurate and precise description of the activities of the Vendor/Bidder, or one of its parents, subsidiaries or affiliates, engaged in the investment activities in Iran by completing the boxes below.

ENTITY NAME:

\_\_\_\_\_

RELATIONSHIP TO VENDOR/BIDDER:

\_\_\_\_\_

DESCRIPTION OF ACTIVITIES:

\_\_\_\_\_

DURATION OF ENGAGEMENT:

\_\_\_\_\_

ANTICIPATED CESSATION DATE:

\_\_\_\_\_

VENDOR/BIDDER CONTACT NAME:

\_\_\_\_\_

VENDOR/BIDDER CONTACT PHONE NO.:

\_\_\_\_\_

*Attach Additional Sheet if Necessary*

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**CERTIFICATION**

I, the undersigned, certify that I am authorized to execute this certification on behalf of the Vendor/Bidder, that the foregoing information and my attachments hereto, to the best of my knowledge are true and complete. I acknowledge that the State of New Jersey is relying on the information contained herein, and that the Vendor/Bidder is under a continuing obligation from the date of this certification through the completion of any contract(s) with the State to notify the State in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification. If I do so, I will be subject to criminal prosecution under the law, and it will constitute a material breach of any agreement(s) with the State, permitting the State to declare any contract(s) resulting from this certification void and unenforceable.

\_\_\_\_\_  
Signature

\_\_\_\_\_ Date

\_\_\_\_\_  
Print Name and Title





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**ATTACHMENT I**

**MACBRIDE PRINCIPLES FORM**

**NOTICE TO ALL BIDDERS REQUIREMENT TO PROVIDE A CERTIFICATION IN COMPLIANCE WITH MACBRIDE PRINCIPLES AND NORTHERN IRELAND ACT OF 1989**

Pursuant to Public Law 1995, c. 134, a responsible bidder selected, after public bidding, by the Director of the Division of Purchase and Property, pursuant to N.J.S.A. 52:34-12, or the Director of the Division of Building and Construction, pursuant to N.J.S.A. 52:32-2, must complete the certification below by checking one of the two representations listed and signing where indicated. If a bidder who would otherwise be awarded a purchase, contract or agreement does not complete the certification, then the Directors may determine, in accordance with applicable law and rules, that it is in the best interest of the State to award the purchase, contract or agreement to another bidder who has completed the certification and has submitted a bid within five (5) percent of the most advantageous bid. If the Directors find contractors to be in violation of the principles which are the subject of this law, they shall take such action as may be appropriate and provided by law, rule or contract, including but not limited to, imposing sanctions, seeking compliance, recovering damages, declaring the party in default and seeking debarment or suspension of the party.

I certify, pursuant to N.J.S.A. 52:34-12.2 that the entity for which I am authorized to bid:

\_\_\_\_\_ has no ongoing business activities in Northern Ireland and does not maintain a physical presence therein through the operation of offices, plants, factories, or similar facilities, either directly or indirectly, through intermediaries, subsidiaries or affiliated companies over which it maintains effective control; or

\_\_\_\_\_ will take lawful steps in good faith to conduct any business operations it has in Northern Ireland in accordance with the MacBride principles of nondiscrimination in employment as set forth in N.J.S.A. 52:18A-89.8 and in conformance with the United Kingdom's Fair Employment (Northern Ireland) Act of 1989, and permit independent monitoring of their compliance with those principles.

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

**EXHIBIT A**

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**MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE**  
**N.J.S.A. 10:5-31 et seq. (P.L. 1975, C. 127)**  
**N.J.A.C. 17:27**

**GOODS, PROFESSIONAL SERVICE AND GENERAL SERVICE CONTRACTS**

During the performance of this contract, the contractor agrees as follows:

The contractor or subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Except with respect to affectional or sexual orientation and gender identity or expression, the contractor will take affirmative action to ensure that such applicants are recruited and employed, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Such action shall include, but not be limited to the following: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting forth provisions of this nondiscrimination clause.

The contractor or subcontractor, where applicable will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex.

The contractor or subcontractor, where applicable, will send to each labor union or representative or workers with which it has a collective bargaining agreement or other contract or understanding, a notice, to be provided by the agency contracting officer advising the labor union or workers' representative of the contractor's commitments under this act and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

The contractor or subcontractor, where applicable, agrees to comply with any regulations promulgated by the Treasurer pursuant to N.J.S.A. 10:5-31 et seq., as amended and supplemented from time to time and the Americans with Disabilities Act.

The contractor or subcontractor agrees to make good faith efforts to employ minority and women workers consistent with the applicable county employment goals established in accordance with N.J.A.C. 17:27-5.2, or a binding determination of the applicable county employment goals determined by the Division, pursuant to N.J.A.C. 17:27-5.2.

The contractor or subcontractor agrees to inform in writing its appropriate recruitment agencies including, but not limited to, employment agencies, placement bureaus, colleges, universities, labor unions, that it does not discriminate on the basis of age, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices.

The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with the principles of job-related testing, as established by the

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statutes and court decisions of the State of New Jersey and as established by applicable Federal law and applicable Federal court decisions.

In conforming with the applicable employment goals, the contractor or subcontractor agrees to review all procedures relating to transfer, upgrading, downgrading and layoff to ensure that all such actions are taken without regard to age, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, consistent with the statutes and court decisions of the State of New Jersey, and applicable Federal law and applicable Federal court decisions.

The contractor shall submit to the public agency, after notification of award but prior to execution of a goods and services contract, one of the following three documents:

Letter of Federal Affirmative Action Plan Approval

Certificate of Employee Information Report

Employee Information Report Form AA302

The contractor and its subcontractors shall furnish such reports or other documents to the Div. of Contract Compliance & EEO as may be requested by the office from time to time in order to carry out the purposes of these regulations, and public agencies shall furnish such information as may be requested by the Div. of Contract Compliance & EEO for conducting a compliance investigation pursuant to **Subchapter 10 of the Administrative Code at N.J.A.C. 17:27.**

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**[PLACE BUSINESS REGISTRATION CERTIFICATE HERE]**