

# Attachment 1

## Lobbying

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying", in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including sub-contracts, sub-grants and contracts under grants, loans and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31 U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Central Paper Products Co. (New England Division of Imperial Dade)

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Company Name

Matthew J. Kfoury

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Authorized Representative Name (Printed)

May 24, 2018

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Authorized Signature

Date

## Attachment 2

### Certification of Compliance for Federally Funded Procurement

The Contractor, if paid from federal funding sources, certifies that it complies with: E.O. 11246, "Equal Employment Opportunity," as amended by E.O. 11375, "Amending Executive Order 11246 Relating to Equal Employment Opportunity," and as supplemented by regulations at 41 CFR part 60, "Office of Federal Contract Compliance Programs, Equal Employment Opportunity, Department of Labor;" 18 U.S.C. 874 and 40 U.S.C. 276c (Copeland "Anti-Kickback" Act); 40 U.S.C. 276a to a-7 (Davis-Bacon Act, as Amended); 40 U.S.C. 327-333 (Contract Work Hours and Safety Standards Act); 37 CFR part 401 (Rights to Inventions Made Under a Contract or Agreement); 42 U.S.C. 6201 (Energy Policy and Conservation Act); 42 U.S.C. 7401 et seq., as amended (Clean Air Act); 33 U.S.C. 1251 et seq., as amended (Federal Water Pollution Control Act); 31 U.S.C. 1352, as implemented 34 CFR Part 82 (Byrd Anti-Lobbying Amendment); E.O.s 12549 and 12689 (Debarment and Suspension); Section 106 of "TVPA" (Trafficking Victims Protection Act of 2000); American Recovery and Reinvestment Act of 2009; Pub. L. 111-5 ("ARRA"), Section 1605 of ARRA; and 2 CFR part 176.140 (Buy American.)

Central Paper Products Co. (New England Division of Imperial Dade)

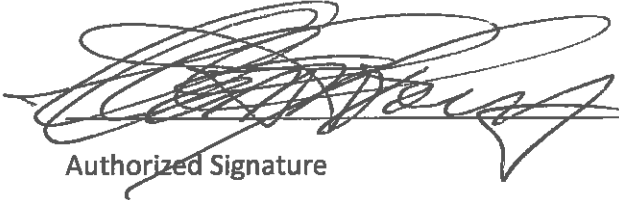
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Company Name

Matthew J. Kfoury

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Authorized Representative Name (Printed)



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Authorized Signature

May 24, 2018

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Date

## Attachment 3

### Certification Regarding Debarment, Suspension, and Other Responsibility Matters Primary Covered Transactions

1. The prospective primary participant certifies to the best of its knowledge and belief that it and its principals:

- a) Are not presently debarred, suspended, proposed for disbarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
- b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
- d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default.

2. Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective primary participant shall attach an explanation to this proposal.

Central Paper Products Co. (New England Division of Imperial Dade)

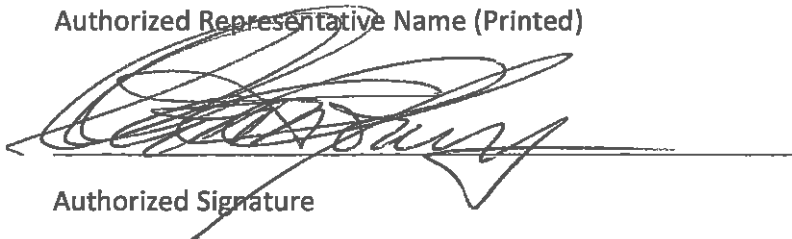
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Company Name

Matthew J. Kfoury

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Authorized Representative Name (Printed)



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Authorized Signature

May 24, 2018

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Date

## Attachment 4

### Historically Underutilized Business (HUB) Certification

Vendors submitting bids that have been certified as Historically Underutilized Business (HUB) entities (Minority, Small Business, Woman Owned), are asked to indicate their HUB status when responding to this Invitation for Bid.

I certify that my company has been certified as a Historically Underutilized Business (HUB).

(Attach a copy of the HUB Certification to this form.)

Central Paper Products Co. (New England Division of Imperial Dade)

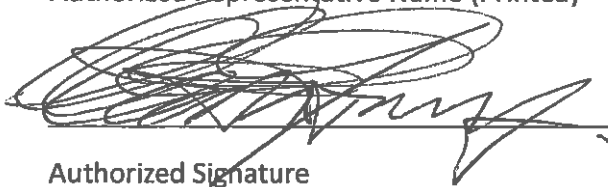
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Company Name

Matthew J. Kfoury

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Authorized Representative Name (Printed)



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Authorized Signature

May 24, 2018

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Date

## Attachment 5

### Acknowledgement of Specifications

The undersigned certifies that they have read the Bid Specifications, and agree to abide by these specifications should they be the successful vendor.

Central Paper Products Co. (New England Division of Imperial Dade)

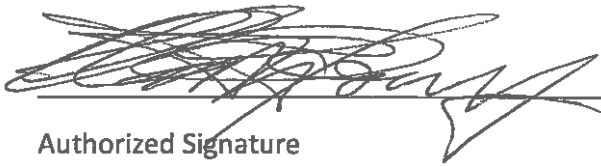
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Company Name

Matthew J. Kfoury

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Authorized Representative Name (Printed)



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Authorized Signature

May 24, 2018

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Date

**CERTIFICATION OF GOOD FAITH & NON-COLLUSION**

The undersigned certifies under pains and penalties of perjury that this bid has been made and submitted in good faith and without collusion or fraud with any other person. As used in this certification, the word "person" shall mean any natural person, business, partnership, corporation, union, committee, club, or other organization, entity, or group of individuals.

**CERTIFICATE OF STATE TAX COMPLIANCE**

Pursuant to M.G.L. c. 62C, §49A, I certify under the penalties of perjury that, to the best of my knowledge and belief, I am in compliance with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting child support.



\_\_\_\_\_  
Signature of authorized individual submitting bid/proposal

Matthew J. Kfoury

Printed Name

Central Paper Products Co.

Name of Business (if applicable)

02-0215737

Social Security or Federal Tax Identification Number



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
05/16/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Willis of New York, Inc. c/o 26 Century Blvd P.O. Box 305191 Nashville, TN 372305191 USA	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): 1-877-945-7378		FAX (A/C, No): 1-888-467-2378
	<b>E-MAIL ADDRESS:</b> certificates@willis.com		
<b>INSURER(S) AFFORDING COVERAGE</b>			<b>NAIC#</b>
<b>INSURER A:</b> Great Northern Insurance Company			20303
<b>INSURER B:</b> Pennsylvania Manufacturers' Association In			12262
<b>INSURER C:</b>			
<b>INSURER D:</b>			
<b>INSURER E:</b>			
<b>INSURER F:</b>			


**COVERAGES**                      **CERTIFICATE NUMBER: W6170622**                      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY			3603-19-56	06/30/2017	07/01/2018	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000
							MED EXP (Any one person) \$ 5,000
							PERSONAL & ADV INJURY \$ 1,000,000
GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:							GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	<b>AUTOMOBILE LIABILITY</b>						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> No	N/A	201775-07-87-96-0	06/30/2017	06/30/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) RE: RFB 2068-18 Janitorial Supplies.						

### CERTIFICATE HOLDER

### CANCELLATION

	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE 

FURNISH & DELIVER VARIOUS PAPER GOODS ITEMS TO THE MASSACHUSETTS  
SCHOOL BUYING GROUP, ANDOVER, MA

Bid No. **XXXXXXXX**

REFERENCES FORM

Bidders Name: Central Paper Products Co.

Bidders Address: P.O. Box 4480  
Manchester, NH 03108

Bidder must provide references for similar type projects performed within the past three years.  
Attach additional pages if necessary.

Reference: Laconia School Lunch Contact: Tim Goossens  
Address: Laconia, NH Phone: (603) 670-7322  
Fax: \_\_\_\_\_

Description and date of Project: Food services, 10+ years

Reference: University of New Hampshire Contact: Rick MacDonald  
Address: Durham, NH Phone: (603) 862-1637  
Fax: \_\_\_\_\_

Description and date of Project: Food service, 10+ years

Reference: Nashua School Lunch Contact: Amy Cassidy  
Address: Nashua, NH Phone: (603) 589-8712  
Fax: \_\_\_\_\_

Description and date of Project: Food service, 10+ years

Reference: \_\_\_\_\_ Contact: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_

Description and date of Project: \_\_\_\_\_



**SIGNATURES**

**(IF AN INDIVIDUAL)**

Date \_\_\_\_\_, 20\_\_\_\_

Signature of Bidder \_\_\_\_\_ (SEAL)  
(Owner and Proprietor)

Business Name D/B/A \_\_\_\_\_

Business Address \_\_\_\_\_

**(IF A CO-PARTNERSHIP)**

Date \_\_\_\_\_, 20\_\_\_\_

Firm Name \_\_\_\_\_ (SEAL)

By \_\_\_\_\_ (SEAL)

Business Address \_\_\_\_\_

Names and Addresses \_\_\_\_\_

of all \_\_\_\_\_

Members of Firm \_\_\_\_\_

**(IF A CORPORATION)**

Date May 24, 2018

Corporate Name Central Paper Products Co.

By  \_\_\_\_\_

President or Authorized Agent\*

Business Address P.O. Box 4480

Manchester, NH 03108

\*Statement of authorization, duly signed by proper authority, to be attached hereto.





Town of Andover, Massachusetts

**IFB # XXXXXXXX**

Town of Andover, Massachusetts  
Purchasing Department

**COVER SHEET**

The Town of Andover reserves the right to reject any or all Proposals, to omit any item or items called for, or to accept the Proposal deemed in the best interest of the Town. Bids must be submitted on or before 1:00 PM on May 24, 2018 to:

Janet Brewer, Actin Purchasing Agent  
Purchasing Department  
Town Office Building  
36 Bartlet Street  
Andover, Massachusetts 01810

The envelope containing the Bid and required information must be sealed and marked with Proposer's name, title of proposal, IFB number, and date of opening. The Proposer must sign all required signature pages in order for the proposal to be considered.

The Proposer acknowledges receipt of the following **ADDENDA # 1, 2** \_\_\_\_\_

**BUSINESS/INDIVIDUAL NAME** Central Paper Products Co., Inc.

**ADDRESS** P.O. Box 4480

**CITY, STATE, ZIP CODE** Manchester, NH 03108

**TELEPHONE** (800) 339-4065

**EMAIL** mkfoury@centralpaper.com

**INDIVIDUAL/AUTHORIZED SIGNATURE** \_\_\_\_\_

**AUTHORIZED OFFICER NAME (print)** Matthew J. Kfoury

**DATE** May 24, 2018

By signing above, the authorized officer is certifying that a complete examination of all bid/rfp documents has been made and that the goods/services will be delivered within the time specified and at the prices stated.

**All bidders must sign and submit with their bid the attached Certificate of Good Faith and Tax Compliance Form. Failure to do so will result in the bid being unresponsive and rejected.**

**If bidder/proposer is a co-partnership**, all partners must execute both copies of the bid/proposal, unless one partner has been authorized to sign for the co-partnership, in which case evidence of such authority shall be submitted.

**If bidder/proposer is a corporation**, the authorized agent shall execute both copies of the bid/proposal. Evidence of authority to sign must be submitted.

The Town of Andover reserves the right to reject any or all bids/proposals and waive any informalities deemed to be in the best interests of the Town.