### Program: 171-S

#### Term: Date of Award to April 30, 2017

#### Title: Earnings MOD, MES, and AURORA Notices

<table>
<thead>
<tr>
<th>Item No.</th>
<th>DESCRIPTION</th>
<th>BASIS OF</th>
<th>CENVIO LOS ANGELES, CA</th>
<th>NPC, INC. CLAYSBURG, PA</th>
<th>CURRENT CONTRACTOR NPC, INC.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>I. COMPOSITION:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a)</td>
<td>Envelopes…………………………….per envelope</td>
<td></td>
<td>41</td>
<td>No Charge</td>
<td>$0.00 $50.00 $2,050.00</td>
</tr>
<tr>
<td>(b)</td>
<td>Pamphlets, Leaflets, Fact Sheets &amp; Forms…….per 8-1/2 x 11” page</td>
<td></td>
<td>216</td>
<td>$10.00</td>
<td>$2,160.00 $10.00 $2,160.00</td>
</tr>
<tr>
<td>(c)</td>
<td>Digital Content Proofs (Revised for AA’s only)…….per 8-1/2 x 11” page</td>
<td></td>
<td>20</td>
<td>$1.00</td>
<td>$20.00 $1.00 $20.00</td>
</tr>
<tr>
<td>(d)</td>
<td>Adobe Acrobat PDF Soft Proof……………………..per file</td>
<td></td>
<td>10</td>
<td>$5.00</td>
<td>$50.00 $5.00 $50.00</td>
</tr>
<tr>
<td>(e)</td>
<td>Digital one-piece composite laminated half-tone proof</td>
<td></td>
<td>10</td>
<td>$11.00</td>
<td>$110.00 $11.00 $110.00</td>
</tr>
<tr>
<td><strong>II. PRINTING/IMAGING and BINDING:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a)</td>
<td>Daily makeready/setup charge…………………….</td>
<td></td>
<td>256</td>
<td>$333.50</td>
<td>$85,376.00 $230.00 $58,880.00</td>
</tr>
<tr>
<td>(b)</td>
<td>Notices (printing/imaging per page)……………..per 100 pages</td>
<td></td>
<td>107,874</td>
<td>$0.67</td>
<td>$72,275.58 $1.35 $145,629.90</td>
</tr>
<tr>
<td>(c)</td>
<td>Mail-out envelope 4-1/8 x 9-1/2”…………….per 100 envelopes</td>
<td></td>
<td>7,530</td>
<td>$2.07</td>
<td>$15,587.10 $0.92 $6,927.60</td>
</tr>
<tr>
<td>(d)</td>
<td>Mail-out envelope 6-1/8 x 9-1/2”…………….per 100 envelopes</td>
<td></td>
<td>24,640</td>
<td>$1.35</td>
<td>$33,264.00 $1.55 $38,192.00</td>
</tr>
<tr>
<td>(e)</td>
<td>CRM Return envelope………………………..per 100 envelopes</td>
<td></td>
<td>5,720</td>
<td>$1.28</td>
<td>$7,321.60 $1.42 $8,122.40</td>
</tr>
<tr>
<td>(f)</td>
<td>CMS CRM refund envelope………………………..per 100 envelopes</td>
<td></td>
<td>322</td>
<td>$1.69</td>
<td>$544.18 $1.02 $328.44</td>
</tr>
<tr>
<td>(g)</td>
<td>BRM refund envelope………………………..per 100 envelopes</td>
<td></td>
<td>2,446</td>
<td>$4.55</td>
<td>$11,129.30 $1.37 $3,351.02</td>
</tr>
<tr>
<td>(h)</td>
<td>Saddle-stitched pamphlets: 2 versions</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Flat size: 7 x 8”; Folded size: 3-1/2 x 8”</td>
<td></td>
<td>05-10095; 05-10137</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Price offered includes binding……………..per 100 pages</td>
<td></td>
<td>4,448</td>
<td>$2.13</td>
<td>$9,474.24 $1.80 $8,006.40</td>
</tr>
<tr>
<td>(i)</td>
<td>Saddle-stitched pamphlets: 3 versions</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Flat size: 10-1/2 x 8”; Folded size: 5-1/4 x 8”</td>
<td></td>
<td>05-10153; 05-10076; 05-10077</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Price offered includes binding……………..per 100 pages</td>
<td></td>
<td>56,088</td>
<td>$0.37</td>
<td>$20,752.56 $0.30 $16,826.40</td>
</tr>
<tr>
<td>(j)</td>
<td>Leaflet: 1 version</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Flat size: 10-1/2 x 8”; Folded size: 5-1/4 x 8”</td>
<td></td>
<td>05-10018</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(k)</td>
<td>Price offered includes folding……………..per 100 complete leaflets</td>
<td></td>
<td>158</td>
<td>$5.23</td>
<td>$826.34 $4.35 $687.30</td>
</tr>
<tr>
<td>(l)</td>
<td>Leaflet: 2 versions</td>
<td></td>
<td>Flat size: 14 x 8”; Folded size: 3-1/2 x 8”</td>
<td>05-10072; 05-10958</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Price offered includes folding……………..per 100 complete leaflets</td>
<td></td>
<td>124</td>
<td>$7.01</td>
<td>$869.24 $5.85 $725.40</td>
</tr>
<tr>
<td>(m)</td>
<td>Leaflets: 3 versions</td>
<td></td>
<td>Flat size: 17-1/2 x 8”; Folded size: 3-1/2 x 8”</td>
<td>16-002; 05-10069; 70-10281</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Price offered includes folding……………..per 100 complete leaflets</td>
<td></td>
<td>248</td>
<td>$4.33</td>
<td>$1,073.84 $3.65 $905.20</td>
</tr>
<tr>
<td>(n)</td>
<td>Leaflets: 1 version</td>
<td></td>
<td>Flat size: 21 x 8”; Folded size: 3-1/2 x 8”</td>
<td>70-10283</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Price offered includes folding……………..per 100 complete leaflets</td>
<td></td>
<td>2</td>
<td>$50.66</td>
<td>$101.32 $50.66 $101.32</td>
</tr>
<tr>
<td>(o)</td>
<td>Fact Sheets: 3 versions</td>
<td></td>
<td>Flat size: 8-1/2 x 11”; Folded size: 8-1/2 x 5-1/2”</td>
<td>05-10007; 05-10045; 05-10075</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Price offered includes folding……………..per 100 complete fact sheets</td>
<td></td>
<td>410</td>
<td>$9.97</td>
<td>$4,087.70 $8.30 $3,403.00</td>
</tr>
<tr>
<td>Item No.</td>
<td>DESCRIPTION</td>
<td>AWARD</td>
<td>UNIT RATE</td>
<td>COST</td>
<td>UNIT RATE</td>
</tr>
<tr>
<td>---------</td>
<td>------------------------------------------------------------------------------</td>
<td>-------</td>
<td>-----------</td>
<td>--------</td>
<td>-----------</td>
</tr>
<tr>
<td>(a)</td>
<td>Form CMS-2690 Flat size: 8-1/2 x 3-1/2&quot; Prints in black - face and back</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Price includes trimming 4 sides per 100 complete forms</td>
<td>270</td>
<td>$3.00</td>
<td>$810.0</td>
<td>$1.85</td>
</tr>
<tr>
<td>(p)</td>
<td>Form SSA-3105 Flat size: 10-1/2 x 8&quot;; Folded size: 3-1/2 x 8&quot; Prints in black - face and back</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Price includes perforing and folding per 100 complete forms</td>
<td>2,148</td>
<td>$6.00</td>
<td>$12,888.0</td>
<td>$1.30</td>
</tr>
<tr>
<td>(q)</td>
<td>Form SSA-L4360-SP Flat size: 8-1/2 x 11&quot;; Folded size: 8-1/2 x 5-1/2&quot; Prints in black - face only</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Price includes folding per 100 complete forms</td>
<td>194</td>
<td>$6.00</td>
<td>$1,164.0</td>
<td>$5.11</td>
</tr>
<tr>
<td>(r)</td>
<td>Form SSA-3885 and Form SSA-4111 Prints in black - face and back</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Price includes folding per 100 complete forms</td>
<td>30</td>
<td>$8.00</td>
<td>$240.00</td>
<td>$5.00</td>
</tr>
<tr>
<td>(s)</td>
<td>Form SSA-150 Prints in black - face and back</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Price includes folding per 100 complete forms</td>
<td>400</td>
<td>$10.00</td>
<td>$4,000.00</td>
<td>$3.44</td>
</tr>
<tr>
<td>(t)</td>
<td>Form SSA-561-U2 Prints in black - face and back</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Price includes binding per 100 complete snap-out sets</td>
<td>2</td>
<td>$400.00</td>
<td>$800.00</td>
<td>$21.12</td>
</tr>
<tr>
<td>(u)</td>
<td>Form SSA-1560-U4 Prints in black - face and back</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Price includes binding per 100 complete snap-out sets</td>
<td>10</td>
<td>$400.00</td>
<td>$4,000.00</td>
<td>$10.33</td>
</tr>
<tr>
<td>(v)</td>
<td>Form SF-180; Form SF-1588; Form SSA-4588-OP1, Form SSA-4588-OP2, Form SSA-4588-OP3, Form SSA-4588-OP4, Form SSA-4588-OP5, and Form SSA-4588-OP6 Prints in black - face and back</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Price includes folding per 100 complete forms</td>
<td>12</td>
<td>$25.00</td>
<td>$300.00</td>
<td>$19.20</td>
</tr>
<tr>
<td>(w)</td>
<td>Form SSA-21; Form SSA-1724 Prints in black - face and back</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Price includes drilling and folding per 100 complete forms</td>
<td>2,610</td>
<td>$10.00</td>
<td>$26,100.00</td>
<td>$3.44</td>
</tr>
<tr>
<td>(x)</td>
<td>Form SSA-1372-BK Prints in black - face and back</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Price includes paste binding per 100 complete booklets</td>
<td>1</td>
<td>$500.00</td>
<td>$500.00</td>
<td>$160.00</td>
</tr>
</tbody>
</table>

**Notes:**
- Item No. (a) through (x) refer to different forms and their specifications listed in the table.
- The descriptions include various sizes, printing methods, and additional features such as trimming, folding, and binding.
- Unit rates and costs are calculated per 100 complete forms or booklets, depending on the item.
<table>
<thead>
<tr>
<th>Item No.</th>
<th>DESCRIPTION</th>
<th>CENVEO LOS ANGELES</th>
<th>NPC, INC.</th>
<th>CURRENT CONTRACTOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>BASIS OF</td>
<td>LOS ANGELES, CA</td>
<td>CLAYSBURG, PA</td>
<td>NPC, INC.</td>
<td></td>
</tr>
<tr>
<td>III. PAPER: Per 100 leaves</td>
<td>Notices:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a)</td>
<td>White Offset Book, 50-lb</td>
<td>$5,936</td>
<td></td>
<td>$39,122.64</td>
</tr>
<tr>
<td>(2)</td>
<td>Format B - 8-1/2 x 11&quot;</td>
<td>$0.75</td>
<td>$40,452.00</td>
<td>$35,597.76</td>
</tr>
<tr>
<td>(b)</td>
<td>Mailout Envelope 4-1/8 x 9-1/2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>White Wove 24-lb or White Offset Book, 50-lb</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td>Format B - 8-1/2 x 11&quot;</td>
<td>$7.53</td>
<td>$9,036.00</td>
<td>$2.07</td>
</tr>
<tr>
<td>(c)</td>
<td>Mail-out Envelope 6-1/8 x 9-1/2&quot;</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>White Kraft 24lb.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td>Format C - 14 x 8&quot;</td>
<td>$24.64</td>
<td>$32,032.00</td>
<td></td>
</tr>
<tr>
<td>(d)</td>
<td>CRM Return Envelope; CMS CRM Refund Envelope</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>White Wove 20 lb.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td>Format B - 8-1/2 x 11&quot;</td>
<td>$2.44</td>
<td>$2,690.60</td>
<td>$1.28</td>
</tr>
<tr>
<td>(e)</td>
<td>CRM Refund Envelope</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Colored Wove, 20-lb.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td>Format B - 8-1/2 x 11&quot;</td>
<td>$6.04</td>
<td>$8,458.80</td>
<td>$4.55</td>
</tr>
<tr>
<td>(f)</td>
<td>All Pamphlets, Leaflets and Fact sheets</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>White Offset Book 60 lb.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1)</td>
<td>Format A - 5-1/4 x 8&quot;</td>
<td>$30.26</td>
<td>$18,160.80</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td>Format B - 8-1/2 x 11&quot;</td>
<td></td>
<td>$568</td>
<td>$511.20</td>
</tr>
<tr>
<td>(3)</td>
<td>Format C - 14 x 8&quot;</td>
<td></td>
<td>$124</td>
<td>$167.40</td>
</tr>
<tr>
<td>(4)</td>
<td>Format D - 17-1/2 x 8&quot;</td>
<td></td>
<td>$248</td>
<td></td>
</tr>
<tr>
<td>(g)</td>
<td>Form CMS-2690</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Yellow Index 90 lb.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1)</td>
<td>Format A - 5-1/4 x 8&quot;</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>White Offset Book 60 lb.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1)</td>
<td>Format A - 5-1/4 x 8&quot;</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>White Writing 20 lb. or White Offset Book 50 lb.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td>Format B - 8-1/2 x 11&quot;</td>
<td></td>
<td>$4,988</td>
<td>$7,482.00</td>
</tr>
<tr>
<td>(i)</td>
<td>Form SSA-3105; Form SSA-L4360-SP Form SSA-3885; Form SSA-150;</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Form SF-180; Form SF-1588; Form SSA-4588(OP1 thru OP6); Form SSA-21;</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Form SSA-1724; and Form SSA-1372-BK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>White Writing 20 lb. or White Offset Book 50 lb.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td>Format B - 8-1/2 x 11&quot;</td>
<td></td>
<td>$4,988</td>
<td></td>
</tr>
<tr>
<td>(j)</td>
<td>Form SSA-3561-U2 (Parts 1 &amp; 2)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>White Chemical Transfer, CB, CF 13-15 lbs.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td>Format B - 8-1/2 x 11&quot;</td>
<td></td>
<td>$2</td>
<td></td>
</tr>
<tr>
<td>(k)</td>
<td>Form SSA-1560-U4 (Part 1)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Chemical Transfer Bond White NCR CB 15 lbs.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td>Format C - 14 x 8&quot;</td>
<td></td>
<td>$10</td>
<td></td>
</tr>
<tr>
<td>(l)</td>
<td>Forms SSA-1560-U4 (Part 4)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Chemical Transfer Bond White NCR CF 15 lbs.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td>Format C - 14 x 8&quot;</td>
<td></td>
<td>$10</td>
<td></td>
</tr>
</tbody>
</table>
Program: 171-S

Term: Date of Award to April 30, 2017

Title: Earnings MOD, MES, and AURORA Notices

<table>
<thead>
<tr>
<th>BASIS OF</th>
<th>LOS ANGELES, CA</th>
<th>CLAYSBURG, PA</th>
<th>NPC, INC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item No.</td>
<td>DESCRIPTION</td>
<td>AWARD UNIT RATE</td>
<td>COST</td>
</tr>
<tr>
<td>1</td>
<td>INSERTING AND MAILING:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Earnings MOD:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a)</td>
<td>Mailers 1, 3, 5, 6, 7- Personalized Notice, mail-out envelope 4-1/8 x 9-1/2&quot;</td>
<td>5,474</td>
<td>$6.00</td>
</tr>
<tr>
<td>(b)</td>
<td>Mailer 2 - Personalized Notice, CRM Return Envelope SSA Pub No. 16-002, mail-out envelope 4-1/8 x 9-1/2&quot;</td>
<td>560</td>
<td>$7.50</td>
</tr>
<tr>
<td>(c)</td>
<td>Mailer 4 - Personalized Notice, Personalized Spanish Cover Letter w/ English Notice, Personalized Spanish Notice, mail-out envelope 4-1/8 x 9-1/2&quot;</td>
<td>1,484</td>
<td>$9.00</td>
</tr>
<tr>
<td></td>
<td>MES:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(d)</td>
<td>Mailer 8 - Personalized Notice, mail-out envelope 4-1/8 x 9-1/2&quot;</td>
<td>14</td>
<td>$100.00</td>
</tr>
<tr>
<td></td>
<td>AURORA:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(e)</td>
<td>Mailers 9 thru 17 - Personalized English Notice, Green BRM Refund Envelope, Goldenrod BRM Reply Envelope, Green CRM Return Envelope, White CRM Return Envelope, White CMS CRM Refund Envelope Publication etc...</td>
<td>24,640</td>
<td>$11.50</td>
</tr>
<tr>
<td>V.</td>
<td>PREPRODUCTION TESTS:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a)</td>
<td>Preproduction Press and Mail Run Test..........</td>
<td>1</td>
<td>$2,500.00</td>
</tr>
<tr>
<td>(b)</td>
<td>Wire Transmission Test..........................</td>
<td>1</td>
<td>$2,500.00</td>
</tr>
<tr>
<td>(c)</td>
<td>Validation Test.................................</td>
<td>1</td>
<td>$2,500.00</td>
</tr>
<tr>
<td>VI.</td>
<td>PROGRAMMING A NEW NOTICE OR NOTICE CHANGE/NEW AND EXISTING NOTICE FILES</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>VALIDATION TEST:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a)</td>
<td>Programming a New Notice or Notice Change............</td>
<td>7</td>
<td>$250.00</td>
</tr>
<tr>
<td>VIII.</td>
<td>NOTICE DESTRUCTION FEE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a)</td>
<td>Per 100 notices destroyed........................</td>
<td>34</td>
<td>$100.00</td>
</tr>
</tbody>
</table>

CONTRACTOR'S SUB-TOTAL

$522,789.20
$894,169.96
$709,087.82

VII. PREMIUM PAYMENTS WHEN DAILY MAILERS EXCEED ESTIMATE MAXIMUM QUANTITIES:

<table>
<thead>
<tr>
<th>PERCENTAGE INCREASE</th>
<th>CONTR'S TOTALS + PERCENTAGE INCREASE</th>
<th>DISCOUNT</th>
<th>DISCOUNTED TOTALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>25%</td>
<td>$934,569.07</td>
<td>$2,336.42</td>
<td>$932,232.65</td>
</tr>
</tbody>
</table>

AWARDED

4 of 4
NOVEMBER 13, 2015

AMENDMENT NO. 1  RE: PROGRAM 171-S  SPECIFICATIONS AMENDED

Bid opening date remains November 30, 2015.

On page 55 of 59 under SECTION 3 – DETERMINATION OF AWARD

Delete

<table>
<thead>
<tr>
<th></th>
<th>(1)</th>
<th>(2)</th>
<th>(3)</th>
<th>(4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(j)</td>
<td>XXX</td>
<td>10</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>(k)</td>
<td>XXX</td>
<td>20</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>(l)</td>
<td>XXX</td>
<td>10</td>
<td>XXX</td>
<td>XXX</td>
</tr>
</tbody>
</table>

Insert

<table>
<thead>
<tr>
<th></th>
<th>(1)</th>
<th>(2)</th>
<th>(3)</th>
<th>(4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(j)</td>
<td>XXX</td>
<td>XXX</td>
<td>10</td>
<td>XXX</td>
</tr>
<tr>
<td>(k)</td>
<td>XXX</td>
<td>XXX</td>
<td>20</td>
<td>XXX</td>
</tr>
<tr>
<td>(l)</td>
<td>XXX</td>
<td>XXX</td>
<td>10</td>
<td>XXX</td>
</tr>
</tbody>
</table>

Remainder of specifications same. Acknowledge on bid or amend bid by letter to U.S. Government Publishing Office -- Bid Section, -- Room C-161, Stop: PPSB, -- Washington, DC 20401, M/F: Program number, bid opening time and date. Failure to acknowledge receipt of this amendment, by amendment number, prior to bid opening time, may be reason for bid being judged nonresponsive.

Authorized by:

BRIAN COLEMAN
Customer Services

Written by: dl
GENERAL TERMS, CONDITIONS, AND SPECIFICATIONS

For the Procurement of

EARNINGS MOD, MES, and AURORA Notices

as requisitioned from the U.S. Government Publishing Office (GPO) by the

Social Security Administration (SSA)

Single Award

TERM OF CONTRACT: The term of this contract is for the period beginning Date of Award and ending
April 30, 2017 plus up to four optional 12-month extension periods that may be added in accordance with the "OPTION TO EXTEND THE TERM OF THE CONTRACT" clause in Section 1 of this contract.

Contractor interfacing with SSA's National File Transfer Management System (FTMS) for electronic transmission of files from SSA to the production facility will take place from Date of Award through April 30, 2016. Actual production begins May 1, 2016.

NOTE: At the discretion of the Government, the primary data transmission method will be via either a dedicated circuit or use of an encrypted Virtual Private Network (VPN) Internet connection.

BID OPENING: Bids shall be publicly opened at 11:00 a.m. prevailing Washington, DC time on November 30, 2015

BID SUBMISSION: Submit bid in pre-addressed envelope furnished with solicitation or send to: U.S. Government Publishing Office, Bid Section, Room C-831, Stop: PPSB, 732 North Capitol Street, NW, Washington, DC 20401. Facsimile bids in response to this solicitation are permitted. Facsimile bids may be submitted directly to the GPO Bid Section, Fax No. (202) 512-1782. The program number and bid opening date must be specified with the bid. Refer to Facsimile Bids in Solicitation Provisions of GPO Contract Terms, GPO Publication 310.2, as revised June 2001. Hand delivered bids are to be taken to The GPO Bookstore at 710 North Capitol Street, NW, Washington, DC between the hours of 8:00 am and 4:00 pm on business days and follow the instructions in the Bid Submission/Opening area. If further instruction or assistance is needed, call 202-512-0526.

PLEASE NOTE: These specifications have been extensively revised. Major revisions are shown below:

- Contract includes an estimated 39 envelopes, dependent on how the contractor mails the workload (e.g., permit, metered, contractor overprints an IR, manifest, etc.), 5 pamphlets, 7 leaflets, 3 fact sheets, and 19 forms with a complex distribution and mailing system.
- External Service Provider Security Requirements - See page 7 of 59 and 13 of 59
- Public Trust Security Requirements – See page 8 of 59
- Monthly inventory report – See page 30 of 59
- Turn-around time for implementation of revised publications and forms – See page 39 of 59.

Bidders are cautioned to familiarize themselves with all provisions of these specifications and our strongly encouraged to ask questions regarding the program requirements prior to bidding.


For information of a technical nature contact David Love at (202) 512-0310 (No collect calls)
SECTION 1 - GENERAL TERMS AND CONDITIONS

GPO CONTRACT TERMS: Any contract which results from this Invitation for Bid will be subject to the applicable provisions, clauses, and supplemental specifications of GPO Contract Terms (GPO Publication 310.2, effective December 1, 1987 (Rev. 6-01)) and GPO Contract Terms, Quality Assurance through Attributes Program for Printing and Binding (GPO Publication 310.1, effective May 1979 (Rev. August 2002)).


DISPUTES: GPO Publication 310.2, GPO Contract Terms, Contract Clause 5. Disputes, is hereby replaced with the June 2008 clause found at www.gpo.gov/pdfs/vendors/contractdisputes.pdf. This June 2008 clause also cancels and supersedes any other disputes language currently included in existing contractual actions.

SUBCONTRACTING: The predominant production function is the laser/ion deposition imaging of data for the notices from electronically transmitted files, inserting and mailing. Any bidder who cannot perform the imaging, inserting and mailing portions of this contract will be declared nonresponsible. Contractor may subcontract the printing of the publications, forms and/or envelopes.

Note: The contractor shall be responsible for enforcing all contract requirements outsourced to a subcontractor.

If the Contractor wishes to add a subcontractor at any time after award the subcontractor must be approved by the Government prior to production starting in that facility. If the sub-contractor is not approved by the Government then the contractor must submit a new subcontractor’s information to the Government for approval 30 calendar days prior to the start of production at that facility.

NOTE: If the contractor plans to enter into a “Contractor Team Arrangement”, or Joint Venture, to fulfill any requirements of this contract, they must comply with the terms and regulations as detailed in the Printing Procurement Regulation – (GPO Publication 305.3; Rev. 2-11).

DISPLAY SAMPLES: Previously printed samples comparable to those to be produced on this contract will be available upon request. To arrange for supplied samples contact David Love at (202) 512-0310 between the hours of 9:00 a.m. and 3:00 p.m., Monday through Friday, until the bid opening date. While these samples are representative of the printing, binding and other operations required for the major part of the work to be ordered on this contract, occasional orders may include additional requirements as provided for in these specifications.

QUALITY ASSURANCE LEVELS AND STANDARDS: The following levels and standards shall apply to these specifications:

Product Quality Levels:
(a) Printing (page related) Attributes – Level III.
(b) Finishing (item related) Attributes – Level III.

Inspection Levels (from ANSI/ASQC Z1.4):
(a) Non-destructive Tests - General Inspection Level I.
(b) Destructive Tests - Special Inspection Level S-2.
(c) Transparent low gloss poly-type window material, covering the envelope window, must pass a readability test with a rejection rate of less than ¼ % when run through a United States Postal Service (USPS) OCR scanner.
(d) Exception: ANSI X3.17 “Character Set for Optical Character Recognition (OCR A)” shall apply to these specifications. The revisions of this standard which are effective as of the date of this contract are those which shall apply.
(e) Exception: The Data Matrix 2D barcodes must be in accordance with the requirements of ANSI MH 10.8.3M unless otherwise specified.

(f) The payment portion below the micro-perforation on the “payment stub”, once detached, will be scanned and must function properly when processed through the current high speed scanning equipment at SSA. A form is a reject and will be considered a major defect when its OCR print cannot be correctly deciphered on the first pass through the scanning equipment (See PRINTING/IMAGING” for additional information regarding perforated payment stub.)

NOTE: Use of equipment or ink which in any way adversely affects the scannability of the payment stub will not be allowed.

ANSI Standards may be obtained from the American National Standards Institute, 25 West 43rd Street, 4th Floor, New York, NY 10036.

Specified Standards: The specified standards for the attributes requiring them shall be:

<table>
<thead>
<tr>
<th>Attribute</th>
<th>Specified Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>P-7. Type Quality and Uniformity</td>
<td>O.K. Press sheets</td>
</tr>
<tr>
<td>P-9. Solid and Screen Tint Color Match</td>
<td>O.K. Press sheets</td>
</tr>
</tbody>
</table>

Special Instructions: In the event that inspection of press sheets is waived by the Government, the following listed alternate standards (in order of precedence) shall become the Specified Standards:

<table>
<thead>
<tr>
<th>Attribute</th>
<th>Specified Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>P-7. Type Quality and Uniformity</td>
<td>Average Type Dimension in Publication</td>
</tr>
<tr>
<td></td>
<td>Camera Copy/Electronic Media</td>
</tr>
<tr>
<td>P-9. Solid and Screen Tint Color Match</td>
<td>Pantone Matching System</td>
</tr>
</tbody>
</table>

OPTION TO EXTEND THE TERM OF THE CONTRACT: The Government has the option to extend the term of this contract for a period of 12 months by written notice to the contractor not later than 30 days before the contract expires. If the Government exercises this option, the extended contract shall be considered to include this clause, except, the total duration of the contract may not exceed four (4) months for setup of file transfer system and testing, and five (5) years for actual production as a result of, and including, any extension(s) added under this clause. Further extension may be negotiated under the “EXTENSION OF CONTRACT TERM” clause. See also “ECONOMIC PRICE ADJUSTMENT” for authorized pricing adjustment(s).

EXTENSION OF CONTRACT TERM: At the request of the Government, the term of any contract resulting from this solicitation may be extended for such period of time as may be mutually agreeable to the GPO and the contractor.

ECONOMIC PRICE ADJUSTMENT: The pricing under this contract shall be adjusted in accordance with this clause, provided that in no event will any pricing adjustment be made that would exceed the maximum permissible under any law in effect at the time of the adjustment. There will be no adjustment for orders placed during the first period specified below. Pricing will thereafter be eligible for adjustment during the second and any succeeding performance period(s). For each performance period after the first, a percentage figure will be calculated as described below and that figure will be the economic price adjustment for that entire next period. Pricing adjustments under this clause are not applicable to reimbursable postage or transportation costs, or to paper, if paper prices are subject to adjustment by separate clause elsewhere in this contract.

For the purpose of this clause, performance under this contract will be divided into successive periods. The first period will extend from the **Date of Award** to **April 30, 2017** and the second and any succeeding period(s) will extend for 12 months from the end of the last preceding period, except that the length of the final period may vary. The first day of the second and any succeeding period(s) will be the effective date of the economic price adjustment for that period.
Pricing adjustments in accordance with this clause will be based on changes in the seasonally adjusted "Consumer Price Index For All Urban Consumers - Commodities Less Food" (Index) published monthly in the CPI Detailed Report by the U.S. Department of Labor, Bureau of Labor Statistics.

The economic price adjustment will be the percentage difference between Index averages as specified in this paragraph. An index called the variable index will be calculated by averaging the monthly Indexes from the 12-month interval ending 3 months prior to the beginning of the period being considered for adjustment. This average is then compared to the average of the monthly Indexes for the 12-month interval ending August 31, 2015 called the base index. The percentage change (plus or minus) of the variable index from the base index will be the economic price adjustment for the period being considered for adjustment.

The Government will notify the contractor by contract modification specifying the percentage increase or decrease to be applied to invoices for orders placed during the period indicated. The contractor shall apply the percentage increase or decrease against the total price of the invoice less reimbursable postage or transportation costs and separately adjusted paper prices. Payment discounts shall be applied after the invoice price is adjusted.

**PAPER PRICE ADJUSTMENT:** Paper prices charged under this contract will be adjusted in accordance with "Table 6 - Producer Price Indexes and Percent Changes for Commodity Groupings and Individual Items" in Producer Price Indexes report, published by the Bureau of Labor Statistics (BLS), as follows:

1. BLS code 0913 for *All Paper* will apply to all paper required under this contract.
2. The applicable index figures for the month of October 2015 will establish the base index.
3. There shall be no price adjustment for the first three production months of the contract.
4. Price adjustments may be monthly thereafter, but only if the index varies by an amount (plus or minus) exceeding 5% by comparing the base index to the index for that month, which is two months prior to the month being considered for adjustment.
5. Beginning with order placement in the fourth month, index variances will be calculated in accordance with the following formula:

\[
\frac{X - \text{Base Index}}{\text{Base Index}} \times 100 = \%\]

where \(X\) = the index for that month which is two months prior to the month being considered for adjustment.

6. The contract adjustment amount, if any, will be the percentage calculated in 5 above less 5%.
7. Adjustments under this clause will be applied to the contractor’s bid price(s) for Item III. “PAPER” in the “SCHEDULE OF PRICES” and will be effective on the first day of any month for which prices are to be adjusted.

The Contracting Officer will give written notice to the Contractor of any adjustments to be applied to invoices for orders placed during months affected by this clause.

In no event, however, will any price adjustment be made which would exceed the maximum permissible under any law in effect at the time of the adjustment. The adjustment, if any, shall not be based upon the actual change in cost to the Contractor, but shall be computed as provided above.

The Contractor warrants that the paper prices set forth in this contract do not include any allowance for any contingency to cover anticipated increased costs of paper to the extent such increases are covered by this price adjustment clause.
SECURITY REQUIREMENTS: Protection of Confidential Information:

(a) The contractor shall restrict access to all confidential information obtained from the SSA in the performance of this contract to those employees and officials who need it to perform the contract. Employees and officials who need access to confidential information for performance of the contract will be determined at the post-award conference between the Contracting Officer and the responsible contractor representative.

(b) The contractor must process all confidential information obtained from SSA in the performance of this contract under the immediate supervision and control of authorized personnel, and in a manner that will protect the confidentiality of the records in such a way that unauthorized persons cannot retrieve any such records.

(c) The contractor must inform all personnel with access to the confidential information obtained from SSA in the performance of this contract of the confidential nature of the information and the safeguards required to protect this information from improper disclosure.

(d) For knowingly disclosing information in violation of the Privacy Act, the contractor and the contractor employees may be subject to the criminal penalties as set forth in 5 U.S.C Section 552a (i)(1), which is made applicable to contractors by 5 U.S.C. 552a (m)(1) to the same extent as employees of the SSA. For knowingly disclosing confidential information as described in section 1106 of the Social Security Act (42 U.S.C. 1306), the contractor and contractor’s employees may also be subject to the criminal penalties as set forth in that provision.

(e) The contractor shall assure that each contractor employee with access to confidential information knows the prescribed rules of conduct, and that each contractor employee is aware that he/she may be subject to criminal penalties for violations of the Privacy Act and/or the Social Security Act.

When the contractor employees are made aware of this information, they will be required to sign the SSA-301, “Contractor Personnel Security Certification”. See Exhibit A.

A copy of this signed certification must be forwarded to: SSA, Paul Campbell, Office of Printing and Alternative Media Services (OPAMS), 1361 Annex Building, 6401 Security Boulevard, Baltimore, MD 21235-6401

A copy must also be forwarded to: U.S. GPO, 732 North Capitol Street, NW, CSAPS, DCT 1, Room C-838, Washington, DC 20401. Attn: David Love

(f) All confidential information obtained from SSA for use in the performance of this contract shall, at all times, be stored in an area that is physically safe from unauthorized access.

(g) Performance of this contract may involve access to tax return information as defined in 26 U.S.C. Section 6103(b) of the Internal Revenue Code (IRC). All such information shall be handled as confidential and may not be disclosed without the written permission of SSA. For willingly disclosing confidential tax return information in violation of the IRC, the contractor and contractor employees may be subject to the criminal penalties set forth in 26 U.S.C. Section 7213.

(h) The Government reserves the right to conduct on-site visits to review the contractor’s documentation and in-house procedures for protection of confidential information.

(i) If a subcontractor is used for the sorting and/or mailing of the notices of this contract the sub-contractor must conform to all security requirements of the contract.

SECURITY WARNING: It is the contractor’s responsibility to properly safeguard all Personally Identifiable Information (PII) from loss, theft, or inadvertent disclosure and to immediately notify the Government of any loss of PII. PII is “any information which can be used to distinguish or trace an individual’s identity, such as their name, social security number, biometric records, etc., alone or when combined with other personal or identifying information which is linked or linkable to a specific individual, such as date and place of birth, mother’s maiden name, etc”.
All employees working on this contract must:

- Be familiar with current information on security, privacy and confidentiality as they relate to the requirements of this contract.
- Obtain pre-screening authorization before using sensitive or critical applications pending a final suitability determination as applicable to the specifications.
- Lock or logoff their workstation/terminal prior to leaving it unattended.
- Act in an ethical, informed and trustworthy manner.
- Protect sensitive electronic records.
- Be alert to threats and vulnerabilities to their systems.
- Be prohibited from having any mobile devices or cameras in sensitive areas that contain any confidential materials. This includes areas where shredding and waste management occurs.

Contractor’s managers working on this contract must:

- Monitor use of mainframes, PCs, LANs, and networked facilities to ensure compliance with national and local policies, as well as the Privacy Act statement.
- Ensure employee screening for sensitive positions has occurred prior to any individual authorized access to sensitive or critical data.
- Implement, maintain, and enforce the security standards and procedures as they appear in this contract and as outlined by the contractor in their approved Security Plan.
- Contact the Contracting Officer immediately whenever a systems security violation is discovered or suspected.

Applicability:

The responsibility to protect PII applies during the entire term of this contract and any allowable option years, if exercised. All contractors must secure and retain written acknowledgement from their employees stating they understand these policy provisions and their duty to safeguard PII.

These policy provisions include, but are not limited to, the following:

- Employees are required to have locking file cabinets or desk drawers for storage of PII, if applicable.
- Material is not to be taken from the contractor’s facility without express permission from the Government.
- Employees must safeguard and protect all Government records from theft and damage while being transported to and from contractor’s facility.

The following list provides examples of situations where PII is not properly safeguarded:

- Leaving an unprotected computer containing Government information in a non-secure space (e.g., leaving the computer unattended in a public place, in an unlocked room, or in an unlocked vehicle).
- Leaving an unattended file containing Government information in a non-secure area (e.g., leaving the file in a break-room or on an employee’s desk).
- Storing electronic files containing Government information on a computer or access device (flash drive, CD, etc.) that other people have access to (not password-protected).

This list does not encompass all failures to safeguard PII but is intended to act as an alert to the contractor’s employees to situations that must be avoided. Misfeasance occurs when an employee is authorized to access Government information that contains sensitive or PII and, due to the employee’s failure to exercise due care, the information is lost, stolen or inadvertently released.
Whenever the Contractor has doubts about a specific situation involving their responsibilities for safeguarding PII, they should consult GPO and/or SSA.

**SSA EXTERNAL SERVICE PROVIDER SECURITY REQUIREMENTS:**

This resource identifies the basic information security requirements related to the procurement of Information Technology (IT) services hosted externally to SSA’s Network.

The following general security requirements apply to all External Service Providers (ESP).

a. The solution must be located in the United States\(^1\), its territories or possessions.

b. Upon request from the SSA Contracting Officer Technical Representative (COTR) the vendor shall provide access to the hosting facility to the US Government or authorized agents for inspection and facilitate an on-site security risk and vulnerability assessment.

c. The solution must meet Federal Information Processing Standards (FIPS) and guidance developed by the National Institute of Science and Technology (NIST) under its authority provided by the Federal Information Security Management Act (FISMA) to develop security standards for federal information processing systems, and Office of Management and Budget’s (OMB) Circular A-130 Appendix III.

d. Solutions classified as Cloud Service Providers (CSP) must adhere to additional FedRAMP security control requirements. Further information may be found at: [http://www.gsa.gov/portal/category/102371](http://www.gsa.gov/portal/category/102371). As part of these requirements CSPs must have a security control assessment performed by a Third Party Assessment Organization\(^2\).

e. Before SSA provides data to the vendor, the vendor shall submit a System Security Plan (SSP) which documents how the solution implements security controls in accordance with the designated FIPS 199 security categorization and the Minimum Security Requirements for Federal Information and Information Systems which requires the use of NIST SP 800-53 or the vendor shall provide a Security Assessment Package (SAP) completed by either an independent assessor\(^3\) or another federal agency.

f. SSA will consider a self-assessment of security controls for solutions that do not involve sensitive information or PII\(^4\).

---

\(^1\)“United States” means the 50 States, the District of Columbia, Puerto Rico, the Northern Mariana Islands, American Samoa, Guam, the U.S. Virgin Islands, Johnston Island, Wake Island, and Outer Continental Shelf Lands as defined in the Outer Continental Shelf Lands Act (43 U.S.C. 1331, et seq.), but does not include any other place subject to U.S. jurisdiction or any U.S. base or possession within a foreign country (29 CFR 4.112).

\(^2\)A Third Party Assessment organization is an organization that has been certified to help cloud service providers and government agencies meet FedRAMP compliance regulations.

\(^3\)Independent assessor is any individual or group capable of conducting an impartial assessment of security controls employed within or inherited by an information system.

\(^4\)PII is any information about an individual maintained by an agency, including (1) any information that can be used to distinguish or trace an individual's identity, such as name, social security number, date and place of birth, mother's maiden name, or biometric records; and (2) any other information that is linked or linkable to an individual, such as medical, educational, financial, and employment information.
References – Refer to most up to date revision.

- Clinger-Cohen Act of 1996 also known as the “Information Technology Management Reform Act of 1996.”
- FIPS PUB 140-2, “Security Requirements for Cryptographic Modules.”
- NIST Special Publication 800-60
- OMB M-07-16, AIMS Chapter 15: Personally Identifiable Information Loss and Remediation

PUBLIC TRUST SECURITY REQUIREMENTS:
This contract has been designated Public Trust Position Level 5C. Due to the sensitive nature of the information contained in the products produced under this contract, contractor employees performing under this contract will be subject to a thorough civil and criminal background check.

“Performing under this contract” is defined as working on-site at an SSA facility (including visiting the SSA site for any reason) or having access to Government programmatic or sensitive information.

Within two (2) days following contract award, the contractor must provide to SSA an Electronic Questionnaire for Investigations Process (eQIP) applicant listing of all individuals for whom the contractor is requesting a suitability determination (i.e., background investigation). This listing should include the following:

- Contractor’s name
- Contract number
- Contractor’s point of contact (CPOC) name
- CPOC’s contact information including email address
- Each applicant’s full name, Social Security Number (SSN), date of birth, and place of birth (must show city and state if born in the United States (U.S.) OR city and country if born outside the U.S.)
The background investigation process will not start until the applicant listing is submitted. Send the applicant listing via Fax to Center for Personnel Security and Project Management (CPSPM) Suitability Team (410) 966-0640 or via traceable means via common carrier to the Social Security Administration, CPSPM Suitability Team, 2601 Annex Building, 6401 Security Boulevard, Baltimore, MD 21235.

Once SSA receives and reviews the applicant listing, SSA will initiate the eQIP. SSA will Email notification to the CPOC the name of each applicant invited into the eQIP website to complete their background investigation form. The CPOC will provide the website to the applicants to complete their eQIP form electronically. The applicant will have up to 14 calendar days following SSA notification to the CPOC of the eQIP invitations to complete the eQIP form.

The applicant must print the signature pages of the SF 85P form prior to releasing the application in eQIP, sign the signature pages and provide the signed originals to the CPOC. See Exhibit B: Questionnaire for Public Trust Positions - Sample Form SF85P

The following is a list of documents the contractor employees will be responsible for completing:

- Original signed and dated eQIP signature pages as specified in the above paragraph.
- Two (2) “Fingerprint Cards” (FD-258). See Exhibit C.
  NOTE: The contractor will absorb the costs for obtaining fingerprints.
- One (1) “Declaration for Federal Employment” (Optional Form 306). See Exhibit D.
- One (1) “Fair Credit Reporting Act Authorization Form”. See Exhibit E.
- For a non-U.S. citizen, one (1) legible photocopy of the work authorization permit and social security card.

The CPOC must ensure all paper forms are fully completed and signed prior to submission to SSA. All forms and fingerprinting cards must be submitted at least 15 workdays prior to the date work is to begin on the contract. Fingerprint cards and all paper forms must be legible or typed in black ink and all signatures must be in black ink. There must be no “breaks” in residences or employment. SSA requires complete addresses, including zip codes and phone numbers with area code. SSA must receive forms and fingerprint cards within 30 calendar days after notification of the eQIP invitation. It is the responsibility of the contractor to ensure fingerprint cards are processed through their local police departments or other authorized fingerprinters. SSA will return incomplete forms back to the contractor. Forms may be obtained by calling SSA Personnel Security Suitability Program Officer (SPO).

The CPOC will submit one cover sheet containing the names of all of the individuals for whom the contractor is submitting completed paperwork. This cover sheet should include the contract number, each applicant’s full name, each applicant’s Social Security Number (SSN), each applicant’s date of birth, and each applicant’s place of birth. The CPOC will submit this cover sheet along with the completed paper forms and two FD-258 fingerprint charts for each applicant via traceable means via common carrier to: SSA, CPSPM Suitability Team, 2601 Annex Building, 6401 Security Boulevard, Baltimore, MD 21235.

The CPOC will also email a copy of the cover sheet to the Contracting Officer Technical Representative (COTR) to the email address shown in the contract. Before forwarding, the CPOC will remove all personal information from the applicant list (SSN, date of birth and place of birth).

NOTE: IT IS THE RESPONSIBILITY OF THE CPOC TO ENSURE CLEARANCES ARE OBTAINED PRIOR TO ANY CONTRACT TESTING.

The CPOC will follow this instruction for new contract employees hired during the contract term.

Suitability Determination:

A Federal Bureau of Investigation fingerprint check is part of the basis used for making a suitability determination. This determination is final unless information obtained during the remainder of the full background investigation, conducted by the Office of Personnel Management, is such that SSA would find the contractor personnel unsuitable to continue performing under this contract. CPSPM will notify the CPOC, COTR, and Contracting Officer of the result of these determinations.
PRE-AWARD SURVEY: In order to determine the responsibility of the prime contractor or any subcontractor, the Government reserves the right to conduct an on-site preaward survey of all of the contractor’s computer, printing, and inserting/mailing equipment which will be used on this contract or to require other evidence of technical, production, managerial, financial, and similar abilities to perform, prior to the award of a contract. Attending the preaward survey will be representatives from the GPO and SSA.

The Preaward Survey will include a review of: all subcontractors involved, along with their specific functions; and the contractor’s/subcontractor’s mail, material, personnel, production, quality control/recovery program, security, and backup facility plans as required by this specification.

If award is predicated on the purchase of production and/or systems equipment, the contractor must provide purchase order(s) with delivery date(s) of equipment to arrive at least 90 calendar days prior to the start of live production, on or about November 1, 2015.

PRODUCTION PLANS: The contractor shall present, in writing, to the Contracting Officer within five (5) workdays of being notified to do so by the Contracting Officer or his/her representative, detailed plans for each of the activities below. Five (5) additional workdays will be permitted to provide a Security Assessment Package as required.

The workday after notification to submit will be the first day of the schedule. These proposed plans are subject to review and approval by the government and award will not be made prior to approval of same.

NOTE: THE GOVERNMENT RESERVES THE RIGHT TO WAIVE SOME OR ALL OF THESE PLANS.

**Backup Facility** - The failure to deliver these notices in a timely manner would have an impact on the daily operations of SSA. Therefore, if for any reason(s) (Act of God, labor disagreements, etc.) the contractor is unable to perform at said location for a period longer than twenty four (24) hours, the contractor must have a backup facility with the capability of producing the notices. The contractor must operate the backup facility.

Plans for their contingency production must be prepared and submitted to the Contracting Officer as part of the preaward survey. These plans must include the location of the facility to be used, equipment available at the facility, security plans at the facility, and a timetable for the start of production at that facility.

Part of the plans must also include the transportation of Government materials from one facility to another. The contractor must produce items from a test file at the new facility for verification of software prior to producing notices at this facility. SSA also has the option to install a connection into the backup facility.

**NOTE:** All terms and conditions of this contract will also apply to the backup facility.

**Quality Control Plan** - The contractor must provide and maintain, within their organization, an independent quality assurance team of sufficient size and expertise. The team must monitor the operations performed and inspect the products of each operation to a degree and extent that will ensure the Government’s quality assurance, inspection, and acceptance provisions herein are met. The contractor must perform, or have performed, the process controls, inspections, and tests required to substantiate that the products provided under this contract conform to the specifications and contract requirements. The contractor must describe in detail their quality control/quality assurance and recovery plans describing how, when and by whom the plans will be performed.

The quality control plan must also include examples and a detailed description of all quality control samples and their corresponding inspection reports or logs the contractor will keep to document the quality control inspections performed on each run.

The quality control system must include all aspects of the job including mail flow and materials handling. The plan must also allow for a complete audit trail (e.g., it must be possible to locate any piece of mail at any time from the point it leaves the press up to and including the point at which the mail is off-loaded at the USPS facility). SSA will not, as a routine matter, request the contractor to produce pieces in transit within the contractor’s plant. Furthermore, the plan must include the names of all quality assurance officials and describe their duties in relationship to the quality control plan.
The quality control plan must account for the number of pieces mailed daily, and must also cover the security over the postage meters as well as the controls for the setting of the meters (if meters will be used).

**Quality Control Sample Plan** - The plan must provide a description of how the contractor will create quality control samples for periodic samplings to be taken during the production run and provide for backup and rerunning in the event of an unsatisfactory sample. The plan must contain control systems that will detect defective or missing/mutilated pieces.

The plan should include the sampling interval the contractor intends to utilize. The contractor will be required to create two (2) quality control samples to be drawn from the production stream at the same time for each file -

- One (1) sample will be drawn, inspected, and retained as part of the contractor’s quality assurance records.
- One (1) sample will be drawn for the SSA, packed with the remaining samples associated with each print order, and shipped to the SSA, Paul Campbell, OPAMS, 1361 Annex Building, 6401 Security Boulevard, Baltimore, MD 21235-6401.

**Note:** Samples must be bulk shipped back to SSA weekly for each print order.

The plans must detail the actions to be taken by the contractor when defects, missing, or mutilated items are discovered. These actions must be consistent with the requirements found in GPO Contract Terms (GPO Publication 310.2, effective December 1, 1987, (Rev. 6-01)).

The plan must monitor all aspects of the job including material handling and mail flow, to assure the production and delivery of these notices meet specifications and Government requirements. This includes maintaining 100% accountability in the accuracy of imaging and mailing of all pieces throughout each run. The contractor must ensure that there are no missing or duplicate pieces.

**NOTE:** Contractor must submit samples of the Automated Audit Report and 100% Accountability Summary Report.

The contractor must maintain quality control samples, inspection reports and records for a period of no less than 120 days subsequent to the date of the check tendered for final payment by the GPO. The Government will periodically verify that the contractor is complying with the approved quality control plan through on-site examinations and/or requesting copies of the contractor’s quality assurance records and quality assurance random copies.

**Computer Systems Plan** - This plan must include a detailed listing of the contractor’s operating software platform and file transfer system necessary to interface with SSA’s National File Transfer Management System (FTMS) for electronic transmission of files from SSA.

The plan must also include the media type on which files from SSA will be received to the extent that operator intervention (e.g., a tape mount) is not required at SSA or the contractor’s production facility.

This plan must demonstrate the contractor’s ability to provide complete hardware and software compatibility with SSA’s existing network (see “FILE TRANSFER MANAGEMENT SYSTEM (FTMS) REQUIREMENTS”). The contractor must complete the System Plan, See Exhibit F.

Included with the Computer System Plan must be a resume for each employee responsible for the monitoring and the programming of the contractor’s computer system and file transmissions. If the contractor plans to use a consultant for either task, a resume must still be included.

**NOTE:** This plan must show that the programmer(s) is skilled in the handling and programming of Advanced Function Presentation (AFP) resources and files.

**Mail Plan** - This plan should include sufficient detail as to how the contractor will comply with all applicable USPS mailing requirements as listed in the USPS Domestic and International Mail Manuals in effect at the time of the mailing and other USPS instructional material such as the Postal Bulletin. The contractor must also disclose how they will achieve multi-level USPS automated presort postal discounts as outlined in the contract.
**Material Handling and Inventory Control Plan** - This plan should explain in detail how the following materials will be handled: incoming raw materials; work-in-progress materials; quality control inspection materials; USPS inspection materials; and all outgoing materials cleared for USPS pick-up/delivery.

**Personnel Plan** - In conjunction with the required applicant listing (see “PUBLIC TRUST SECURITY REQUIREMENTS”), this plan should include a listing of all personnel who will be involved with this contract. For any new employees, the plan should include the source of these employees and a description of the training programs the employees will receive to familiarize them with the requirements of this program.

**Production Plan** - The contractor is to provide a detailed plan of the following:

(a) List of all production equipment and equipment capacities to be utilized on this contract;
(b) The production capacity currently being utilized on this equipment;
(c) Capacity that is available for these workloads; and,
(d) If new equipment is to be utilized, documentation of the purchase order, source, delivery schedule and installation dates are required.

The contractor must disclose in their production plan their intentions for the use of any subcontractors for any materials necessary under this contract. If a subcontractor will be handling SSA notices, the plan must include the same information required from the contractor for all items contained under “SECURITY REQUIREMENTS” and “PRE-AWARD SURVEY”. If a subcontractor for any operation is added at any time after award, the contractor must submit the subcontractor’s proposed plans which are subject to review and approval by the Government.

**Security Control Plan** - The contractor shall maintain in operation, an effective security system where items by these specifications are manufactured and/or stored (awaiting distribution or disposal) to assure against theft and/or the product ordered falling into unauthorized hands.

Contractor is cautioned that no Government provided information shall be used for non-government business. Specifically, no Government information shall be used for the benefit of a third party.

The Government retains the right to conduct on-site security reviews at any time during the term of the contract.

The plan shall contain at a minimum:

(1) How Government files (data) will be secured to prevent disclosure to a third party;
(2) How the disposal of waste materials will be handled;
(3) How all applicable Government-mandated security/privacy/rules and regulations as cited in this contract shall be adhered to by the contractor and/or subcontractor(s).

**Materials** - The contractor is required to explain how all accountable materials will be handled throughout all phases of production. This plan must also include the method of disposal of all production waste materials.

**Disposal of Waste Materials** - The contractor is required to demonstrate how all waste materials used in the production of sensitive SSA records (records containing PII information as identified in “SECURITY WARNING”) will be definitively destroyed (e.g., burning, pulping, shredding, macerating, or other suitable similar means). Electronic records must be definitively destroyed in a manner that prevents reconstruction.

Sensitive records are records that are national security classified or exempted from disclosure by statute, including the Privacy Act or regulation.

Definitively destroying the records means the material **cannot** be reassembled and used in an inappropriate manner in violation of law and regulations.
The contractor, at a minimum, must cross-cut shred all documents into squares not to exceed one-quarter inch. All documents to be destroyed cannot leave the security of the building and must be destroyed at contractor’s printing site, and cannot be subcontracted. The contractor must specify the method planned to dispose of the material.

**Production Area** - The contractor must provide a secure area(s) dedicated to the processing and storage of data for SSA notices, either a separate facility dedicated to this product, or a walled-in limited access area within the contractor’s existing facility. Access to the area(s) must be limited to security-trained employees involved in the production of notices.

Part of the Security Control Plan must include a floor plan detailing the area(s) to be used, showing existing walls, equipment to be used, and the printing and finishing locations. The plan must include a description of the physical security of the facility as well as the physical security of this notice contract as it progresses to completion.

Contractor must have, in place, a building security system that is monitored 24 hours a day, seven (7) days a week, and a badging/keypunch system that limits access to Government materials (data processing center/production facility and other areas where Government materials with PII are stored or are accessible) that is only accessible by approved personnel. Contractor must present this information, in detail, in the production plans.

Contractors using Cloud Service Providers (CSP) must adhere to additional FedRAMP security control requirements. CSPs must have a security control assessment performed by a Third Party Assessment Organization. Contractor may refer to page 7 for additional information.

The Contractor shall submit a System Security Plan which documents how they will implement security controls in accordance with the designated FIPS 199 security categorization and the Minimum Security Requirements for Federal Information and Information Systems which requires the use of NIST SP 800-53 or the vendor shall provide a Security Assessment Package completed by either an independent assessor or another federal agency. Contractor may refer to page 7 for additional information.

**THESE PLANS ARE SUBJECT TO REVIEW AND APPROVAL BY THE GOVERNMENT AND AWARD WILL NOT BE MADE PRIOR TO APPROVAL OF THE SAME.**

**UNIQUE IDENTIFICATION NUMBER:** Unique identifying numbers will be used to track each individual notice, thereby providing 100% accountability. This enables the contractor to track each notice through completion of the project. The contractor will be required to create a test sample every 4,000 notices. This sample must have a unique number and must be produced on each notice. The contractor will generate a list of the unique identifying numbers for each sample. As samples are pulled, the unique numbers will be marked off the list. This enables the contractor to track which samples have been produced and pulled and what records have been produced.

The contractor may create their own sequence number and run date to facilitate their presorting and inserting process but must maintain the original SSA identification number.

**RECOVERY SYSTEM:** A recovery system will be required to ensure that all defective, missing and/or mutilated pieces detected are identified, reprinted and replaced. The contractor’s recovery system must use the unique sequential alpha/numeric identifiers assigned to each piece (including quality control samples) to aid in the recovery and replacement of any defective, missing and/or mutilated pieces, and must be capable of tracking and/or locating any individual piece of mail from the time it leaves the press, up to and including when it is off-loaded at the USPS facility. An explanation of the contractor’s sequential numbering system is required to understand the audit trail required for every piece.

**100% ACCOUNTABILITY OF PRODUCTION AND MAILING:** Contractor must have a closed loop process* to determine that the data from the original print file is in the correct envelope with the correct number of pages and inserts. Notices requiring print regeneration must be reprinted from their original print image with the original job ID and piece ID remaining unchanged as each mail piece continues through the inserting life cycle. This process will repeat itself (since subsequent reprint runs may yield damages) until all mail pieces from the original print run have been inserted and accounted for.
*Closed Loop Processing* - A method for generating a plurality of mail pieces including error detection and reprinting capabilities. The method provides a mail handling process, which tracks processing errors with the use of a first and second scan code, which obtain information regarding each mail piece, diverts mail pieces in response to error detection, transmits such errors to a processor, and automatically generates a reconfigured print file to initiate reprints for the diverted mail pieces.

Contractor will be responsible for providing a unique identifying number that will be used to track each individual notice, thereby providing **100% accountability and validating the integrity of every notice** produced in all phases of printing, inserting and mailing and to ensure all notices received from SSA were correctly entered into the USPS system.

**NOTE:** Contractor must have all hardware, programming and finalized reports in place to meet this requirement. The equipment must arrive at least **90 calendar days** prior to the start of live production, on or about **February 1, 2016**. Contractor must submit a sample of their proposed Audit and Summary reports with the required Pre-Award production plans for approval. The government considers grounds for the immediate default of this contract if the contractor, at any time, is unable to perform or found not complying with any part of this requirement.

**Notice integrity must be defined as follows:**

- Each notice must include all pages (and only those pages) intended for the designated recipient as contained in the print files received from SSA.
- The contractor’s printing process must have automated systems, which can detect all sync errors, stop printing when detected, and identify, remove and reprint all affected notices.

**Mailing integrity must be defined as follows:**

- All notices received from SSA for each file date were printed, inserted and entered correctly into the USPS system.

The contractor is responsible for providing the **automated** inserted notice tracking/reporting systems and processes required to validate that 100% of all notices received from SSA were printed, all pages for each notice with the correct inserts are accounted for, inserted and mailed correctly.

The contractor’s inserting equipment must have automated systems that include notice coding and scanning technology capable of the following:

(a) Uniquely identifying each notice and corresponding notice leaves within each individual file by mailer number and file date.

(b) Unique identifier to be scanned during insertion to ensure all notices and corresponding notice leaves are present and accounted for.

(c) **Entrance Scanning:** a camera system must electronically track and scan all leaves of each mail piece as the inserting equipment pulls them into the machine to ensure each mail piece was produced and inserted. If there is any variance on a mail piece or if a mail piece is not verified that all leaves are present, that piece and the piece prior to and immediately following must be diverted and sent back for reprint. All instances of variance must be logged.

(d) **Touch and Toss:** all spoilage, diverted mutilated or mail piece that is acted upon directly by a human hand prior to sealing must be immediately recorded, discarded, properly destroyed, and automatically regenerated in a new print file for reprint. **Exception** – Intentionally diverted pieces due to a requirement for a product, which cannot be intelligently inserted and requires manual insertion such as a publication, can be sealed, re-scanned and placed back into production. These must be programmed diverts and sent to a separate bin for processing to ensure they are not mixed with other problem diverts and logged into the Audit system as such. **NOTE:** due to inserting equipment limitations, the contractor can divert and insert by hand notices over 50 leaves. These notices, to ensure notice integrity, are to be scanned and collated by an automated process prior to manual handling for inserting. The completed mail package must then be processed through exit scanning. The event log report must show these as “50+ Manual”.


(e) **Exit Scanning:** A camera system must be mounted just off the inserting equipment. This camera system must read a unique code through the window of each mail piece and capable of identifying and reporting all missing notices that were lost or spoiled during production for each individual file by mailer number and file date. This system ensures that no missing mail pieces have been inadvertently inserted into another mail piece. The equipment must check the mail pieces, after insertion and verification that all leaves are accounted for, and divert any suspect product. During exit scanning, if a sequence number is missing the notice prior to and immediately after must be diverted.

The equipment must divert all products that exhibit missing or out of order sequence numbers and any other processing errors. All diverted pieces are to be automatically recorded and regenerated in a new print file for reprint.

(f) **Reconciliation:** all notices and the amount of correct finished product must be electronically accounted for after insertion using the audit system that is independent of the inserting equipment as well as independent of the operation. The sequence numbers, for each file, must be reconciled taking into account any spoilage, duplicate and/or diverted product. If the reconciliation yields divergent results, corrective action must be taken to locate the mail pieces that are causing any difference between the input and outputs of the inserting process. Therefore, all finished mail for that sequence run must be held in an accessible area until this reconciliation is complete.

(g) Generate a new production file for all missing, diverted or mutilated notices (reprint file).

(h) Contractor must generate an automated audit report from the information gathered from scanning for each mailer number, file date and for each notice (manual inputs are not allowed). This audit report will contain detailed information for each notice as outlined above for each individual file by mailer number and file date. Contractor must maintain this information for a six-month period after mailing.

(i) Audit report must contain the following information:

1. Job name
2. Mailer number, file date and mail date(s)
3. Machine ID
4. Date of production with start and end time for each phase of the run i.e. machine ID.
5. Start and end sequence numbers in each run
6. Status of all sequence numbers in a run
7. Total volume in run
8. Status report for all incidents for each sequence number and cause, i.e. inserted, diverted and reason for divert such as missing sequence number, missing leave, mutilated, duplicate, pulled for inspection, etc.
9. Bottom of audit report must contain total number of records for that run, quantity sent to reprint, number of duplicates, duplicates verified and pulled, total completed.
10. Audit report must contain the same information for all the reprints

(j) Contractor must generate a **final automated 100% accountability summary report** for each individual file by mailer number and file date. This information must be generated directly from the audit report, manual inputs are not allowed. The summary report must contain the following:

1. Job name
2. Each individual file by mailer number and file date (must show sequence numbers for each section i.e. first pass and then reprints)
3. Sequence number range for each individual file by mailer number and file date
4. Volume of all sequence numbers associated with an individual file by mailer number and file date were inserted.
5. Volume of reprints that were inserted for each file date.
6. Volumes for each file date that each was completed.
NOTE: A PDF copy of the summary report(s) and matching GPO 712 form(s) must be e-mailed to Paul Campbell at Paul.Campbell@ssa.gov for each file date within two (2) workdays of mailing.

NOTE: Contractor must submit a sample of their Audit and Summary reports (See Exhibit G) with the required Pre-Award production plans for approval.

Contractor must generate an automated audit report when necessary showing the tracking of all notices through all phases of production for each mail piece. This audit report will contain all information as outlined in item (i) above.

Contractor is required to provide any requested Summary and/or Audit reports within an hour of a request via Email in MS Word, MS Excel or PDF.

All notice tracking/reporting data must be retained in electronic form for 210 days after mailing, and must be made available to SSA for auditing of contractor performance upon request.

The contractor must maintain quality control samples, inspection reports and records for a period of no less than 180 days subsequent to the date of the check tendered for final payment by the GPO. The Government will periodically verify that the contractor is complying with the approved quality control plan through on-site examinations and/or requesting copies of the contractor’s quality assurance records and quality assurance random copies.

Note: The Government will not as a routine matter request the contractor produce individual pieces in transit within the plant, however, the contractor must demonstrate they will have an audit trail established that has the ability to comply with this type of request when and if the need arises.

Pulling of Notices from Production: The Government may request certain notices be removed from the production stream based on Social Security Number (SSN). The SSN(s) for each notice is contained in the Mail Run Data (MRD) File. See Exhibit H.

The contractor must be able to run a sort to find and eliminate the notice from the production run. If the list is provided after the notice had been produced, the contractor must be capable of identifying the notice and pulling it from the production floor. It is anticipated this will be an infrequent occurrence.

Option Years: For each option year * that may be exercised, the contractor will be required to review their plans and re-submit in writing the above plans detailing any changes and/or revisions that may have occurred. The revised plan is subject to Government approval and must be submitted to the Contracting Officer or his/her representative within five (5) workdays of notification of the option year being exercised.

* For each option year exercised, the amount of time in the schedule will remain the same

NOTE: If there are no changes/revisions, the contractor will be required to submit to the Contracting Officer or his/her representative a statement confirming that the current plans are still in effect.

ON-SITE REPRESENTATIVES: One or two full-time Government representatives may be placed on the contractor's premises on a limited basis or throughout the term of the contract.

The contractor will be required to provide a private workspace with a telephone line, internet access, and one facsimile machine.

On-site representative(s) may be stationed at the contractor's facility to: provide project coordination in receipt of transmissions; verify addresses; monitor the printing, folding, inserting, mail processing, quality control, sample selections and inspections; and monitor the packing and staging of the mail. These representatives will not have contractual authority, and cannot make changes in the specifications or in contract terms, but will bring defects detected, to the attention of the company Quality Control Officer. The coordinators must have full and unrestricted access to all production areas where work on this program is being performed.

POST-AWARD CONFERENCE: In order to ensure that the contractor fully understands the total requirements of the job as indicated in these specifications, Government representatives will conduct a conference with the contractor’s representatives at the SSA, 6401 Security Boulevard, Baltimore, MD, 21235 immediately after award.
PRE-PRODUCTION MEETING: A pre-production meeting covering printing and mailing must be held at the contractor's facility after award of the contract to review the contractor's production plan and to establish coordination of all operations. Attending this meeting will be representatives from the GPO, SSA, and the USPS (USPS).

The contractor must present and explain their final plan for both the printing and mailing of all notices (the contractor must be prepared to present detailed production plans, including such items as quality assurance, projected commencement dates, equipment loading, pallet needs, etc.).

The contractor must meet with SSA and USPS representatives to present and discuss their plan for mailing. The preproduction meeting will include a visit to the contractor's mailing facility, where the contractor is to furnish specific mail flow information. The contractor must present documentation of the Plant Load agreement and either a copy of the optional procedure, which has been negotiated with the USPS or a draft of the original procedure that the contractor intends to negotiate with the USPS for SSA approval. The contractor also needs to present SSA with a copy or a draft of the manifest (tracking system) to be used to accomplish the above.

SSA may conduct unscheduled visits during the term of this contract at the contractor’s mailing facility. In addition, a mail plan detailing how the contractor will obtain maximum automation postage discounts will be e-mailed to Francine.Moore@ssa.gov after the contract award. The contractor is to provide the name of the representative responsible for the mailing operation and that individual's backup.

ASSIGNMENT OF JACKETS, PURCHASE, TASK, and PRINT ORDERS: A GPO jacket number will be assigned and a purchase order issued to the contractor to cover the work performed. The purchase order will be supplemented by an individual print order for each job placed with the contractor. The print order, when issued, will indicate the quantity to be produced and any other information pertinent to the order.

ORDERING: Items to be furnished under the contract must be ordered by the issuance of weekly print orders supplemented by daily electronic task orders. Orders may be issued under the contract from Date of Award through April 30, 2017 plus for such additional periods as the contract is extended. All print orders and task orders issued hereunder are subject to the terms and conditions of the contract. The contract must control in the event of conflict with any print order or task order.

Task orders will be “issued” daily for purposes of the contract and will detail the daily volume of notices required. A print order (GPO Form 2511) to be used for billing purposes will be issued weekly and will cover all daily task orders issued that week.

REQUIREMENTS: This is a requirements contract for the items and for the period specified herein. Shipment/delivery of items or performance of work shall be made only as authorized by orders issued in accordance with the clause entitled “ORDERING.” The quantities of items specified herein are estimates only, and are not purchased hereby. Except as may be otherwise provided in this contract, if the Government’s requirements for the items set forth herein do not result in orders in the amounts or quantities described as “estimated,” it shall not constitute the basis for an equitable price adjustment under this contract.

Except as otherwise provided in this contract, the Government shall order from the contractor all the items set forth which are required to be purchased by the Government activity identified on page 1.

The estimated quantities specified in the "Determination of Award" are not the total requirements of the Government but are the estimates of requirements. The Government shall not be required to purchase from the contractor, requirements in excess of the limit on total orders under this contract, if any.

Orders issued during the effective period of this contract and not completed within that time shall be completed by the contractor within the time specified in the order, and the rights and obligations of the contractor and the Government respecting those orders shall be governed by the terms of this contract to the same extent as if completed during the effective period of this contract.
If shipment/delivery of any quantity of an item covered by the contract is required by reason of urgency prior to the earliest date that shipment/delivery may be specified under this contract, and if the contractor will not accept an order providing for the accelerated shipment/delivery, the Government may procure this requirement from another source.

The Government may issue orders which provide for shipment/delivery to or performance at multiple destinations.

Subject to any limitations elsewhere in this contract, the contractor shall furnish to the Government all items set forth herein which are called for by print orders issued in accordance with the “ORDERING” clause of this contract.

**PRIVACY ACT NOTIFICATION:** This procurement action requires the contractor to do one or more of the following: design, develop, or operate a system of records on individuals to accomplish an agency function in accordance with the Privacy Act of 1974, Public Law 93-579, December 31, 1974 (5 U.S.C. 552a) and applicable agency regulations. Violation of the Act may involve the imposition of criminal penalties.

**PRIVACY ACT**

(a) The contractor agrees:

(1) to comply with the Privacy Act of 1974 and the rules and regulations issued pursuant to the Act in the design, development, or operation of any system of records on individuals in order to accomplish an agency function when the contract specifically identifies (i) the system or systems of records and (ii) the work to be performed by the contractor in terms of any one or combination of the following: (A) design, (B) development, or (C) operation;

(2) to include the solicitation notification contained in this contract in every solicitation and resulting subcontract and in every subcontract awarded without a solicitation when the statement of work in the proposed subcontract requires the design, development, or operation of a system of records on individuals to accomplish an agency function; and

(3) to include this clause, including this paragraph (3), in all subcontracts awarded pursuant to this contract which require the design, development, or operation of such a system of records.

(b) In the event of violations of the Act, a civil action may be brought against the agency involved where the violation concerns the design, development, or operation of a system of records on individuals to accomplish an agency function, and criminal penalties may be imposed upon the officers or employees of the agency where the violation concerns the operation of a system of records on individuals to accomplish an agency function. For purposes of the Act when the contract is for the operation of a system of records on individuals to accomplish an agency function, the contractor and any employee of the contractor is considered to be an employee of the agency.

(c) The terms used in this clause have the following meanings:

(1) “Operation of a system of records” means performance of any of the activities associated with maintaining the system of records including the collection, use, and dissemination of records.

(2) “Record” means any item, collection or grouping of information about an individual that is maintained by an agency, including, but not limited to, his education, financial transactions, medical history, and criminal or employment history and that contains his name, or the identifying number, symbol, or other identifying particular assigned to the individual, such as a finger or voice print or a photograph.

(3) “System of records” on individuals means a group of any records under the control of any agency from which information is retrieved by the name of the individual or by some identifying number, symbol, or other identifying particular assigned to the individual.
CRIMINAL/CIVIL SANCTIONS:

(1) Each officer or employee of any person to whom returns or return information is or may be disclosed must be notified in writing by such person that returns or return information disclosed to such officer or employee can be used only for a purpose and to the extent authorized herein, and that further disclosure of any such returns or return information for a purpose or to an extent unauthorized herein constitutes a felony punishable upon conviction by a fine of as much as $5,000 or imprisonment for as long as five years, or both, together with the costs of prosecution. Such person shall also notify each such officer and employee that any such unauthorized further disclosure of returns or return information may also result in an award of civil damages against the officer or employee in an amount not less than $1,000 with respect to each instance of unauthorized disclosure. These penalties are prescribed by IRC Sections 7213 and 7431 and set forth at 26 CFR 301.6103(n).

(2) Additionally, it is incumbent upon the contractor to inform its officers and employees of the penalties for improper disclosure imposed by the Privacy Act of 1974, 5 U.S.C. 552a. Specifically, 5 U.S.C. 552a(i)(1), which is made applicable to contractors by 5 U.S.C. 552a(m)(1), provides that any officer or employee of a contractor, who by virtue of his/her employment of official position, has possession of or access to agency records which contain individually identifiable information, the disclosure of which is prohibited by the Privacy Act or regulations established there under, and who knowing that disclosure of the specific material is prohibited, willfully discloses the material in any manner to any person or agency not entitled to receive it, shall be guilty of a misdemeanor and fined not more than $10,000.
SECTION 2 - SPECIFICATIONS

SCOPE: These specifications cover the production of mailing packages from three (3) notice workloads: (1) EARNINGS MOD; (2) MES; and (3) AURORA. The workloads consist of English ONLY personalized notices, Spanish ONLY personalized notices, English personalized notice with Spanish cover letter, and Bilingual English/Spanish/English personalized notice (prints English, then several Spanish paragraphs and is completed in English); English and Spanish forms, fact sheets, leaflets and booklet inserts; mail-out envelopes; business reply mail (BRM) envelopes and courtesy reply mail (CRM) envelopes; requiring such operations as: the receipt and processing of transmitted data; re-development of AFP resources; composition; proofing of inserts; printing and imaging; dating of a form insert, binding, folding; inserting; manifesting, presorting, and mailing.

NEW NOTICES - During the term of this contract, the Government anticipates developing new notice workloads with the same requirements as the mailing packages described by these specifications. All terms and conditions in these specifications will apply to any future notice workloads. SSA estimates approximately one (1) to three (3) new notice workloads may be added during the term of this contract. File names for the new mailers will be supplied to the contractor as they are developed.

The data set names listed below may not be the final data set names transmitted to the contractor. If there are changes, final data set names will be provided to the contractor at the post-award meeting.

<table>
<thead>
<tr>
<th>FILE NAME</th>
<th>MAILER</th>
<th>DATA SET NAME*</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EARNINGS MOD</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- SEADJUST</td>
<td>1</td>
<td>OLBG.BTI.vendor.SEAAFP.M11*****.RYYMMDD</td>
</tr>
<tr>
<td>- RECON</td>
<td>2</td>
<td>OLBG.BTI.vendor.E15AFP.M21*****.RYYMMDD</td>
</tr>
<tr>
<td>- RESUB PAPER</td>
<td>3</td>
<td>OLBG.BTI.vendor.RSBAFP.M31*****.RYYMMDD</td>
</tr>
<tr>
<td>- ICOR</td>
<td>4</td>
<td>OLBG.BTI.vendor.EMSAFP.M41*****.RYYMMDD</td>
</tr>
<tr>
<td>- IRES</td>
<td>5</td>
<td>OLBG.BTI.vendor.IREAFP.M51*****.RYYMMDD</td>
</tr>
<tr>
<td>- RESUB ELECTRONIC</td>
<td>6</td>
<td>OLBG.BTI.vendor.RSBAFP.M61*****.RYYMMDD</td>
</tr>
<tr>
<td>- PUPS (PRIS)</td>
<td>7</td>
<td>OLBG.BTI.vendor.PRIAEP.M71*****.RYYMMDD</td>
</tr>
<tr>
<td><strong>MES</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>8</td>
<td>OLBG.BTI.vendor.MESAEP.M81*****.RYYMMDD</td>
</tr>
<tr>
<td><strong>AURORA</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>9</td>
<td>OLBG.BTI.vendor.CTPAFP.M9#*****.RYYMMDD</td>
</tr>
<tr>
<td></td>
<td>10</td>
<td>OLBG.BTI.vendor.CTPAFP.M0#*****.RYYMMDD</td>
</tr>
<tr>
<td></td>
<td>11</td>
<td>OLBG.BTI.vendor.CTPAFP.MA#*****.RYYMMDD</td>
</tr>
<tr>
<td></td>
<td>12</td>
<td>OLBG.BTI.vendor.CTPAFP.MB#*****.RYYMMDD</td>
</tr>
<tr>
<td></td>
<td>13</td>
<td>OLBG.BTI.vendor.CTPAFP.MC#*****.RYYMMDD</td>
</tr>
<tr>
<td></td>
<td>14</td>
<td>OLBG.BTI.vendor.CTPAFP.MD#*****.RYYMMDD</td>
</tr>
<tr>
<td></td>
<td>15</td>
<td>OLBG.BTI.vendor.CTPAFP.ME#*****.RYYMMDD</td>
</tr>
<tr>
<td></td>
<td>16</td>
<td>OLBG.BTI.vendor.CTPAFP.MF#*****.RYYMMDD</td>
</tr>
<tr>
<td></td>
<td>17</td>
<td>OLBG.BTI.vendor.CTPAFP.MG#*****.RYYMMDD</td>
</tr>
</tbody>
</table>

All of the data set names are not listed for Aurora (Mailers 9-17). The “#” will be replaced with 1 through 8 for each of the Program Service Centers (PC). The “*****” represents the unique job identifier assigned at run time.

There are eight (8) files (or data set names) for Aurora. As an example data set name “CTPAFP.MB” (Mailer 9) breakout follows:

OLBG.BTI.vendor.PC1.CTPAFP.MB1*****.Ryymmdd
OLBG.BTI.vendor.PC2.CTPAFP.MB2*****.Ryymmdd
OLBG.BTI.vendor.PC3.CTPAFP.MB3*****.Ryymmdd
OLBG.BTI.vendor.PC4.CTPAFP.MB4*****.Ryymmdd
OLBG.BTI.vendor.PC5.CTPAFP.MB5*****.Ryymmdd
OLBG.BTI.vendor.PC6.CTPAFP.MB6*****.Ryymmdd
OLBG.BTI.vendor.PC7.CTPAFP.MB7*****.Ryymmdd
Aurora mailers are broken down and transmitted in segments by PC codes. Each file transmitted will have a banner page identifying the PC and required inserts. Additional information about banner pages can be found on page 30 of this contract. The PC codes correspond to the mail-out envelope required as follows:

PC1  - Northeastern (Jamaica, NY)
PC2  - Mid-Atlantic (Philadelphia, PA)
PC3  - Southeastern (Birmingham, AL)
PC4  - Great Lakes (Chicago, IL)
PC5  - Western (Richmond, CA)
PC6  - Mid-America (Kansas City, MO)
PC7  - Office of Central Operations (Domestic Claims) (Baltimore, MD)
PC8  - Office of International Operations (Foreign & Domestic) (Baltimore, MD)

NOTE: AURORA files can contain third party notices. The first page of a third party notice prints as an address to one of the following: Administrative Law Judge (ALJ), attorney, NOE Copy or a Representative for the beneficiary (Rep Payee). Subsequent pages in third party notices print as duplicate notice (original copy of this notice is also in an AURORA file to be printed separately) addressed to an SSA beneficiary.

MAKE-UP OF MAILERS:

A record will be transmitted for each mailing address and will contain all the data relevant for the mailing of an associated mail piece. Unique alpha/numeric identifiers will be part of the record to ensure accuracy in the insertion process.

FOR QUALITY CONTROL AND AUDITING PURPOSES:

The contractor must not merge file dates and mailers during processing, printing, and inserting. All files transmitted by SSA will be physical sequential. Any alteration of the notice content in the file is not permitted. The figures shown below are estimates based on historical data of past production runs.

Note - notices are duplex printed and one-side only when an odd page is required. Exact quantities will not be known until each run is electronically transmitted to the contractor. NO SHORTAGES WILL BE ALLOWED.

The total number of mailers has been estimated for each frequency requirement (Daily, Weekly, Monthly, and Quarterly). If the total for each frequency exceeds 25 percent, the Contractor will receive a “Premium Payment” as offered in the "Schedule of Prices". See page 24 of 57: Estimated Minimums and Maximums

NOTICES: Notices ordered under this contract will range from one (1) to 20 printed pages per notice. See the following for page counts of each mailer.

EARNINGS MOD: The Earnings Mod mailers are English, Spanish, Spanish Cover Letter with English and Bilingual English/Spanish/English notices (prints English, then Spanish and remainder is English – all in one notice) represented by the following data set names. Notices can consist of an estimated 1-7 printed pages.

1. OLBG.BTI.vendor.SEAAFP.M11*****.RYYMMDD (SEADJUST)

Weekly Minimum : 3,700 (*prints once weekly
Weekly Maximum : 15,000
Estimated Annual : 500,000
Estimated Printed Pages: 1
Average Printed Pages : 1
Inserts : Personalized English Notice
Mail-out envelope 4-1/8 x 9-1/2"
Folding : Tri-Fold

NOTE: Self-Employment Adjustment notices will consist of one (1) file per week. The file could consist of up to 15,000 notices.
2. OLBG.BTI.vendor.E15AFP.M21*****.RYYMMDD (RECON)
   Weekly Minimum : 80
   Weekly Maximum : 22,310 (Approximately four (4) times a year, in February, April, June, and August, RECON notices may experience an increase due to IRS activity)
   Estimated Annual : 50,000
   Estimated Printed Pages: 1-7
   Average Printed Pages : 7
   Inserts : Personalized English Notice
            Mail-out envelope 4-1/8 x 9-1/2"
            CRM Return Envelope
            SSA Pub. No. 16-002 (NOTE: Publications are used for original notices only.)
   Folding : Tri-Fold

MAILER 2a (RECON) has six (6) LARGE-SPIKE runs each year. Estimated dates of receipt are in November, late January or early February, late February or early March, Mid-March, June, and late June or early July.
   LARGE SPIKE Minimum: 30,000
   LARGE SPIKE Maximum: 225,000
   Estimated Annual : 730,000
   Estimated Printed Pages: 1-7
   Average Printed Pages : 7
   Inserts : Personalized English Notice
            Mail-out envelope 4-1/8 x 9-1/2"
            CRM Return Envelope
            SSA Pub. No. 16-002 (Only used for Nov, Jan, and Feb mailings)
   Folding : Tri-Fold

MAILER 2b (RECON) has four (4) MINI-SPIKE runs each year. Estimated dates of receipt are in February, April, June, and August following a large Spike run (2a above).
   MINI-SPIKE Minimum: 9,500
   MINI-SPIKE Maximum: 30,000
   Estimated Annual : 100,000
   Estimated Printed Pages: 1-6
   Average Printed Pages : 6
   Inserts : Personalized English Notice
            Mail-out envelope 4-1/8 x 9-1/2"
            CRM Return Envelope
            SSA Pub. No. 16-002 (Only used for Nov, Jan, and Feb mailings)
   Folding : Tri-Fold

3. OLBG.BTI.vendor.RSBAFP.M31*****.RYYMMDD (RESUB PAPER)
   Daily Minimum : 1
   Daily Maximum : 800 (this would only possibly occur during peak W-2 processing months of March - May)
   Estimated Annual : 12,300
   Estimated Printed Pages: 1-3
   Average Printed Pages : 1
   Inserts : Personalized Bilingual English/Spanish/English Notice
            Mail-out envelope 4-1/8 x 9-1/2"
   Folding : Tri-Fold
4. OLBG.BTI.vendor.EMSAFP.M41*****.RYYMDD (ICOR)
   Daily Minimum : 195
   Daily Maximum : 2,530
   Estimated Annual : 135,000
   Estimated Printed Pages : 1-4
   Average Printed Pages : 1
   Inserts : Personalized English Notice
            Personalized Spanish Cover Letter with English Notice
            Personalized Spanish Notice
            Mail-out envelope 4-1/8 x 9-1/2"
   Folding : Tri-Fold

5. OLBG.BTI.vendor.IREAFP.M51*****.RYYMDD (IRES)
   Daily Minimum : 134
   Daily Maximum : 9,300 (Daily volumes can increase to 9,300 during the months of January -
                   April
   Estimated Annual : 240,000 IRES
   Estimated Printed Pages : 1-2
   Average Printed Pages : 2
   Inserts : Personalized English Notice
            Mail-out envelope 4-1/8 x 9-1/2"
   Folding : Tri-Fold

6. OLBG.BTI.vendor.RSBAFP.M61*****.RYYMDD (RESUB-ELECTRONIC)
   Daily Minimum : 1
   Daily Maximum : 400 (This would only possibly occur during peak W-2 processing months of
                   February - April)
   Estimated Annual : 2,500
   Estimated Printed Pages : 1-3
   Average Printed Pages : 3
   Inserts : Personalized English Notice
            Mail-out envelope 4-1/8 x 9-1/2"
   Folding : Tri-Fold

7. OLBG.BTI.vendor.PRIA AFP.M71*****.RYYMDD (PUPS-PRIS)
   Monthly Minimum : 0
   Monthly Maximum : 2,500
   Estimated Annual : 30,000
   Estimated Printed Pages : 1-7
   Average Printed Pages : 4
   Inserts : Personalized English Notice
            Mail-out envelope 4-1/8 x 9-1/2"
   Folding : Tri-Fold
**MES:** The MES mailer is an English only notice represented by the following data set name. The mailer consists of a one-page notice with a mail-out envelope.

8. OLBG.BTI.vendor.MESAFP.M81*****.RYYMMDD
   - Daily Minimum: 0
   - Daily Maximum: 14
   - Estimated Annual: 1,100
   - Estimated Printed Pages: 1
   - Average Printed Pages: 1
   - Inserts: Personalized English Notice
   - Mail-out envelope: 4-1/8 x 9-1/2"
   - Folding: Tri-Fold

**AURORA:** Aurora mailers are English ONLY notices. Notices can consist of an estimated 1-20 pages.

**NOTE:** Aurora notices contain approximately 30% manual insertions.

9. OLBG.BTI.vendor.CTPAFP.M9#*****.RYYMMDD (AJS-1)
   - Daily Minimum: 0
   - Daily Maximum: 260
   - Estimated Annual: 5,300
   - Estimated Printed Pages: 1-12
   - Average Printed Pages: 3
   - Inserts: *
   - Folding: Bi-Fold

10. OLBG.BTI.vendor.CTPAFP.M0#*****.RYYMMDD (MCS)
    - Daily Minimum: 0
    - Daily Maximum: 1,100
    - Estimated Annual: 131,000
    - Estimated Printed Pages: 1-12
    - Average Printed Pages: 2
    - Inserts: *
    - Folding: Bi-Fold

11. OLBG.BTI.vendor.CTPAFP.MA#*****.RYYMMDD (MADCAP)
    - Daily Minimum: 800
    - Daily Maximum: 5,200
    - Estimated Annual: 680,000
    - Estimated Printed Pages: 1-12
    - Average Printed Pages: 4
    - Inserts: *
    - Folding: Bi-Fold
12. OLBG.BTI.vendor.CTPAFP.MB#*****.RYYMMDD (TATTER)
   - Daily Minimum: 0
   - Daily Maximum: 1
   - Estimated Annual: 10
   - Estimated Printed Pages: 1-12
   - Average Printed Pages: 3
   - Inserts: *
   - Folding: Bi-Fold

13. OLBG.BTI.vendor.CTPAFP.MC#*****.RYYMMDD (REACT)
   - Daily Minimum: 0
   - Daily Maximum: 1
   - Estimated Annual: 20
   - Estimated Printed Pages: 1-12
   - Average Printed Pages: 2
   - Inserts: *
   - Folding: Bi-Fold

14. OLBG.BTI.vendor.CTPAFP.MD#*****.RYYMMDD (T2R)
    - Daily Minimum: 790
    - Daily Maximum: 3,800
    - Estimated Annual: 410,000
    - Estimated Printed Pages: 1-12
    - Average Printed Pages: 2
    - Inserts: *
    - Folding: Bi-Fold

15. OLBG.BTI.vendor.CTPAFP.ME#*****.RYYMMDD (MISC)
    - Daily Minimum: 1,100
    - Daily Maximum: 10,500
    - Estimated Annual: 1,021,000
    - Estimated Printed Pages: 1-8
    - Average Printed Pages: 3
    - Inserts: *
    - Folding: Bi-Fold

16. OLBG.BTI.vendor.CTPAFP.MF#*****.RYYMMDD (IRMAA)
    - Daily Minimum: 0
    - Daily Maximum: 1,300
    - Estimated Annual: 8,000
    - Estimated Printed Pages: 1-20
    - Average Printed Pages: 3
    - Inserts: *
    - Folding: Bi-Fold

NOTE: (Bulk of the quantity for the IRMAA Mailer 16 will print during November and December.)
17. OLBG.BTI.vendor.CTPAFP.MG#*****.RYYMMDD (SNO)

- Daily Minimum: 1
- Daily Maximum: 100
- Estimated Annual: 8,500
- Estimated Printed Pages: 1-20
- Average Printed Pages: 3
- Inserts: *
- Folding: Bi-Fold

* Aurora mailers may generate any combination of following components:

Personalized English Notice

Mail-out Kraft Envelope 6-1/8 x 9-1/2" (with [IR designator for Mailer 16 ONLY] or without designator)

Green Business Reply Mail (BRM) Envelope (referred to as a Refund envelope)

Goldenrod BRM Envelope (referred to as a Reply envelope)

Green Courtesy Reply Mail (CRM) Envelope (PO Box 32900)

White CRM Return Envelope

Centers for Medicare and Medicaid Services (CMS) CRM Refund Envelope (centered address is PO Box 790355, St Louis MO, 63179-0355)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>05-10076</td>
<td>05-10007</td>
<td>SF-180</td>
</tr>
<tr>
<td>05-10077</td>
<td>05-10045</td>
<td>SF-1588</td>
</tr>
<tr>
<td>05-10095</td>
<td>05-10075</td>
<td>SSA-4588 OP1</td>
</tr>
<tr>
<td>05-10153</td>
<td>Form CMS-2690</td>
<td>SSA-4588 OP2</td>
</tr>
<tr>
<td>05-10137</td>
<td>Form SSA-3105</td>
<td>SSA-4588 OP3</td>
</tr>
<tr>
<td>05-10018</td>
<td>Form SSA-L4360-SP</td>
<td>SSA-4588 OP4</td>
</tr>
<tr>
<td>05-10072</td>
<td>Form SSA-3885</td>
<td>SSA-4588 OP5</td>
</tr>
<tr>
<td>05-10958</td>
<td>Form SSA-4111</td>
<td>SSA-4588 OP6</td>
</tr>
<tr>
<td>05-10069</td>
<td>Form SSA-150</td>
<td>SSA-21</td>
</tr>
<tr>
<td>70-10281</td>
<td>Form SSA-561-U2</td>
<td>SSA-1724</td>
</tr>
<tr>
<td>70-10283</td>
<td>Form SSA-1560-U4</td>
<td>SSA-1372-BK</td>
</tr>
</tbody>
</table>

**TRANSMISSION PROBLEMS:**

On occasion SSA may experience transmission problems resulting in no mailers for the day. The transmission problem, once corrected, may result in multiple files or merged files transmitted the following day. In addition, the Aurora workload (Mailers 9-17) is a manual process and, on occasion, we have encountered formatting problems as the result of user input errors. The contractor will receive notice as to when a new replacement notices/file will be retransmitted.

As we continue to address these problems, the frequency of “bad files” have lessened significantly, however, on occasion they do still exist. The contractor is cautioned should a “bad file” be received, which could be identified in either the imaging or insertion process, the contractor will need to provide SSA with a password protected PDF of the notice responsible for the equipment shut down. Based on historical data, SSA estimates the number of bad notices/files as three per year.

NOTE: A destruction fee for the notices/files, in addition to the printing and inserting of notices in this file requiring destruction will be paid for according to the contract’s line item charges for printing and inserting (inserting charges will only be paid if the contractor has already inserted the notices).
TRIM SIZES:

<table>
<thead>
<tr>
<th>Notices</th>
<th>Mail-out Envelopes: 4-1/8 x 9-1/2&quot; and 6-1/8 x 9-1/2&quot;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mail-out Envelopes: 4-1/8 x 9-1/2&quot; and 6-1/8 x 9-1/2&quot;</td>
<td></td>
</tr>
<tr>
<td>BRM and CRM Envelopes: 3-7/8 x 8-7/8&quot;</td>
<td></td>
</tr>
<tr>
<td>Pamphlets:</td>
<td>Pamphlets:</td>
</tr>
<tr>
<td>Publication No. 05-10076: 5-1/4 x 8&quot;, 20 pages</td>
<td></td>
</tr>
<tr>
<td>Publication No. 05-10077: 5-1/4 x 8&quot;, 24 pages</td>
<td></td>
</tr>
<tr>
<td>Publication No. 05-10095: 3-1/2 x 8&quot;, 24 pages</td>
<td></td>
</tr>
<tr>
<td>Publication No. 05-10153: 5-1/4 x 8&quot;, 24 pages</td>
<td></td>
</tr>
<tr>
<td>Publication No. 05-10137: 3-1/2 x 8&quot;, 32 pages</td>
<td></td>
</tr>
<tr>
<td>Leaflets:</td>
<td>Leaflets:</td>
</tr>
<tr>
<td>Publication No. 05-10018: 10-1/2 x 8&quot; flat size</td>
<td></td>
</tr>
<tr>
<td>Publication No.'s: 05-10076; 05-10958: 14 x 8&quot; flat size</td>
<td></td>
</tr>
<tr>
<td>Publication No.'s: 05-10069; 70-10281; and 16-002: 17-1/2 x 8&quot; flat size</td>
<td></td>
</tr>
<tr>
<td>Publication No. 70-10283: 21 x 8&quot; flat size</td>
<td></td>
</tr>
<tr>
<td>Fact Sheets:</td>
<td>Fact Sheets:</td>
</tr>
<tr>
<td>Publication No’s: 05-10007, 05-10045, 05-10075: 8-1/2 x 11&quot; flat size</td>
<td></td>
</tr>
<tr>
<td>Forms:</td>
<td>Forms:</td>
</tr>
<tr>
<td>Form CMS-2690:</td>
<td>Form CMS-2690: 8-1/2 x 3-1/2&quot;</td>
</tr>
<tr>
<td>Form SSA-3105:</td>
<td>Form SSA-3105: 10-1/2 x 8&quot; flat size</td>
</tr>
<tr>
<td>Form SSA-L4360-SP</td>
<td>Form SSA-L4360-SP 8-1/2 x 11&quot;</td>
</tr>
<tr>
<td>Form SSA-3885; Form SSA-4111</td>
<td>Form SSA-3885: 8-1/2 x 11”</td>
</tr>
<tr>
<td>Form SSA-150</td>
<td>Form SSA-150: 8-1/2 x 11”</td>
</tr>
<tr>
<td>Form SSA-561-U2:</td>
<td>Form SSA-561-U2: 8-1/2 x 11” (Stub-less 2-part set)</td>
</tr>
<tr>
<td>Form SSA-1560-U4:</td>
<td>Form SSA-1560-U4: 8-1/2 x 11-5/8” (includes 5/8” binding stub.)</td>
</tr>
<tr>
<td>Form SF-180; Form SF-1588</td>
<td>Form SF-180: 17 x 11” flat size</td>
</tr>
<tr>
<td>Forms SSA-4588-OP1 through OP6</td>
<td>Forms SSA-4588-OP1 through OP6 17 x 11” flat size</td>
</tr>
<tr>
<td>Form SSA-21; Form SSA-1724</td>
<td>Form SSA-21: 17 x 11” flat size</td>
</tr>
<tr>
<td>Form SSA-1372-BK</td>
<td>Form SSA-1372-BK: 8-1/2 x 11”; 8 page pasted</td>
</tr>
</tbody>
</table>

FREQUENCY OF ORDERS AND QUANTITY: Combined total for Earnings Mod, MES, and Aurora mailers is approximately 3,820,100 per year.

- Estimated total quantity for the Earnings MOD Mailers 1-7 is 1,555,000 notices per year.
- Estimated total quantity for the MES Mailer 8 is 1,100 notices per year.
- Estimated total quantity for the Aurora Mailers 9-17 is 2,264,000 notices per year.

NOTE: The Government reserves the right to increase or decrease by 20% of the total number of notices ordered annually.

**EARNINGS MOD/MES MAIL-OUT ENVELOPES:**

TRIFOLD SIZE: 4-1/8 x 9-1/2"

Estimated 90-Calendar Day Volumes

Mailer 1 (SEADJUST)/Mailer 7 (PUPS/PRIS)/Mailer 8 (MES) 129,399
Mailer 2 (RECON) 147,500
Mailer 3 (RESUB PAPER)/Mailer 6 (RESUB ELECTRONIC) 3,700
Mailer 4 (ICOR) 33,850
Mailer 5 (IRES) 50,000

**AUORRA MAIL-OUT ENVELOPE:**

Program Service Center (Mailers 9-15 and Mailer 17) Estimated 90-Calendar Day Volumes

Northeastern Program Service Center (PC1) 67,500
Mid-Atlantic Program Service Center (PC2) 36,100
Southeastern Program Service Center (PC3) 55,400
Great Lakes Program Service Center (PC4) 58,000
Western Program Service Center (PC5) 72,800
Mid-America Program Service Center (PC6) 91,500
Office of Central Operations (PC7) 184,500
Office of International Operations (PC8) 10,200

Program Service Center (Mailer 16) (IR designator) Estimated 90-Calendar Day Volumes

Northeastern Program Service Center (PC1) 350
Mid-Atlantic Program Service Center (PC2) 170
Southeastern Program Service Center (PC3) 250
Great Lakes Program Service Center (PC4) 450
Western Program Service Center (PC5) 450
Mid-America Program Service Center (PC6) 400
Office of Central Operations (PC7) 10*
Office of International Operations (PC8) 10*

*Since the estimated yearly quantity for PC7 and PC8 envelopes used for Mailer 16 is expected to be less than 500, the contractor can over-print an “IR” designator using an appropriate Aurora mail-out envelope. The format of the “IR” designator (font size, location, etc.) must be approved by SSA and must meet USPS standards.

**EARNINGS MOD CRM RETURN ENVELOPE (WHITE):**

Mailer 2 (RECON) Estimated 90-Calendar Day Volume

140,000

**AUORRA BRM “REFUND” ENVELOPES:**

All Aurora notices with PC1 through PC7 within the data set name, which require a BRM *refund* envelope, will receive a PC2 green envelope (with PO Box 3430 in the centered address). The contractor is responsible for setting up their equipment to ensure the correct envelope is inserted.

All Aurora notices with PC8 within the data set name, which require a BRM refund envelope, will receive a green PC8 CRM envelope (with PO Box 32900 in the centered address).

Note - Business reply mail does not exist in International mail. The contractor is responsible for setting up their equipment to ensure the correct envelope is inserted.

Program Service Center Estimated 90-Calendar Day Volume

Mid-Atlantic Program Service Center (green BRM PC2) 56,000
Office of Central Operation (PO Box 32900) (green CRM PC8) 700
**AURORA BRM “REPLY” ENVELOPES:**

All Aurora notices with PC1 through PC7 in the data set name, which require a BRM reply envelope, will receive a PC specific goldenrod envelope. There is no PC8 goldenrod reply envelope for PC8 (BRM does not exist in International mail). Aurora notices with a PC8 in the data set name requesting a reply envelope will use a white CRM PC8 envelope (with PO Box 17769 in the centered address). For quantities of this envelope, see counts under “RETURN ENVELOPES” below. The contractor is responsible for setting up their equipment to ensure the correct envelope is inserted.

Program Service Center | Estimated 90-Calendar Day Volumes
--- | ---
Northeastern Program Service Center (PC1) | 700
Mid-Atlantic Program Service Center (PC2) | 350
Southeastern Program Service Center (PC3) | 200
Great Lakes Program Service Center (PC4) | 50
Western Program Service Center (PC5) | 3750
Mid-America Program Service Center (PC6) | 100
Office of Central Operations (PC7) | 450

**AURORA CRM “WHITE” ENVELOPES:**

Program Service Center | Estimated 90-Calendar Day Volumes
--- | ---
Northeastern Program Service Center (PC1) | 21,000
Mid-Atlantic Program Service Center (PC2) | 8,400
Southeastern Program Service Center (PC3) | 12,800
Great Lakes Program Service Center (PC4) | 14,250
Western Program Service Center (PC5) | 20,500
Mid-America Program Service Center (PC6) | 28,900
Office of Central Operations (PC7) | 13,750
Office of International Operations (PC8) | 650

When Form CMS-2690 is inserted in an Aurora notice (for PC1 through PC8), a CRM “white” return envelope (shown above) will be required. The contractor is responsible for setting up their equipment to ensure the correct envelope is inserted.

**AURORA CMS CRM “WHITE” REFUND ENVELOPES):**

Program Service Center | Estimated 90-Calendar Day Volume
--- | ---
Medicare Premium Collection Center | 7,450

**PUBLICATION INSERT - EARNINGS MOD - RECON (MAILER 2)**

Form/Publication Number | Estimated 90-Calendar Day Volume
--- | ---
SSA Publication No. 16-002 | 87,000

**PUBLICATION AND FORM INSERTS—AURORA (MAILERS 9 to 17):**

Publication/Form Number | Estimated 90-Calendar Day Volumes
--- | ---
Pub. No. 05-10076 | 2,000
Pub. No. 05-10077 | 24,000
Pub. No. 05-10095 | 1,000
Pub. No. 05-10153 | 25,500
Pub. No. 05-10137 | 2,400
<table>
<thead>
<tr>
<th>Publication/Form Number</th>
<th>Estimated 90-Calendar Day Volumes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pub. No. 05-10018</td>
<td>4,000</td>
</tr>
<tr>
<td>Pub. No. 05-10072</td>
<td>3,100</td>
</tr>
<tr>
<td>Pub. No. 05-10958</td>
<td>*50</td>
</tr>
<tr>
<td>Pub. No. 05-10069</td>
<td>*50</td>
</tr>
<tr>
<td>Pub. No. 70-10281</td>
<td>3,100</td>
</tr>
<tr>
<td>Pub. No. 70-10283</td>
<td>*50</td>
</tr>
<tr>
<td>Pub. No. 05-10007</td>
<td>1,200</td>
</tr>
<tr>
<td>Pub. No. 05-10045</td>
<td>8,900</td>
</tr>
<tr>
<td>Pub. No. 05-10075</td>
<td>250</td>
</tr>
<tr>
<td>CMS Form 2690</td>
<td>6,400</td>
</tr>
<tr>
<td>Form SSA-3105</td>
<td>50,000</td>
</tr>
<tr>
<td>Form SSA-L4360-SP</td>
<td>4,800</td>
</tr>
<tr>
<td>Form SSA-3885</td>
<td>3,500</td>
</tr>
<tr>
<td>Form SSA-4111</td>
<td>800</td>
</tr>
<tr>
<td>Form SSA-150</td>
<td>10,000</td>
</tr>
<tr>
<td>Form SSA-561-U2</td>
<td>*250</td>
</tr>
<tr>
<td>Form SSA-1560-U4</td>
<td>350</td>
</tr>
<tr>
<td>Form SF-180</td>
<td>*200</td>
</tr>
<tr>
<td>Form SSA-1588</td>
<td>*100</td>
</tr>
<tr>
<td>Form SSA-4588 OP1 – OP6</td>
<td>*50 each</td>
</tr>
<tr>
<td>Form SSA-21</td>
<td>*100</td>
</tr>
<tr>
<td>Form SSA-1724</td>
<td>52,000</td>
</tr>
<tr>
<td>Form SSA-1372-BK</td>
<td>*100</td>
</tr>
</tbody>
</table>

*Indicates annual volume. Contractor is authorized to print a year’s worth of stock.

Contractor is not to preprint or maintain more than a 90-calendar day surplus/inventory of any of the components required on this contract with the exception for inserts listed where the yearly volume is expected to be less than 250.

Contractor is required to forward a monthly inventory report of all pamphlets, leaflets, fact sheets, forms, and envelopes used in this program. This report must show the beginning balance, monthly usage, and ending balance for each item. The report is due the first day of the month for the preceding month. Reports are to be emailed to: Paul Campbell, Division of Printing Management (DPM) at Paul.Campbell@ssa.gov.

**GOVERNMENT TO FURNISH:**

- Manuscript copy for 39 envelopes.
- Camera copy for the Facing Identification Mark (FIM) and IMB barcode for reply envelopes.
- PS Form 3615, Mailing Permit Application, and Customer Profile.
- First-Class Mail Postage and Fees Paid permit mailing indicia
- Official Government Postage Meters
- National Change of Address (NCOA) Certificate
- Coding Accuracy Support System (CASS) Certificate.

A data connection between the contractor’s specified location and the nearest available SSA network interface location or SSA’s National Computer Center in Baltimore, MD.

At the Government’s option the following may be furnished:

- Camera Copy, negatives or electronic files (PostScript format) for recycled paper logo and legend (English and Spanish).
- Camera Copy, negatives or electronic files (PostScript or PDF format) for pamphlets, leaflets, fact sheets, and forms.
NOTE: If electronic media is available, the contractor must be able to accept files electronically via a contractor hosted FTP server.

The electronic media will be as follows:

*Platform:* Macintosh OSX (or latest version); IBM Windows XP, Windows 95, Windows NT 4.0, Windows 2000 operating systems.

*Storage Media:* Files furnished via contractor-hosted SFTP server. On occasion: CD-R/RW; DVD-R/RW; Email.

*Software:* Adobe Creative Suite (InDesign, Photoshop, Illustrator, Acrobat); Quark Express; Ventura Publisher; Adobe Capture; PageMaker; Corel Draw; or FrameMaker.

All files will be created in the current versions or near current versions of the above mentioned versions. Files will be furnished in native applications and postscript format, or as a PDF.

*Note:* All platform system and software upgrades (for specific applications) which may occur during the term of the contract must be supported by the contractor.

*Fonts:* All printer and screen fonts for the pamphlets, leaflets, and fact sheets will be furnished. The contractor is cautioned furnished fonts are the property of the Government and/or its originator. All furnished fonts are to be eliminated from the contractor’s archive immediately after completion of the contract.

Exhibit A: Form SSA-301, Contractor Personnel Security Certification.
Exhibit B: Questionnaire for Public Trust Positions – Sample Form SF85P
Exhibit C: Sample Finger Print Card FD-258.
Exhibit D: Declaration for Federal Employment Optional Form 306
Exhibit E: Fair Credit Reporting Act Authorization Form
Exhibit F: System Plan
Exhibit G: Audit and Summary Report
Exhibit H: Mail Run Data File
E-mail Address File of Key GPO and SSA Personnel

**Electronic Files:**

All files will be electronically transmitted to the contractor and contain a complete record for each notice. Any programming or other format changes necessitated due to the contractor’s method of production will be the full responsibility of the contractor and must be completed prior to SSA’s validation.

*Note: The contractor must not compress files in the processing for this contract.*

The contractor will receive three (3) files for each print file: the Advanced Function Presentation (AFP) file, the Mail Run Data (MRD) file and the Banner (BNR) file.

Note: the BNR and MRD files share the same naming Convention as the other files, just with “MRD” and “BNR” replacing the “AFP”.

For example:

MRD file: OLBG.BTI.vendor.SEAAFP.M11*****.RYYMDD would be:
OLBG.BTI.vendor.SEAMRD.M11*****.RYYMDD.

The notice files for printing are formatted in AFP printing platform in duplex printing (face and back). For proper processing of AFP, SSA supplies resources used for printing notices in AFP format.
The AFP files contain the data to be imaged for that individual recipient. The MRD file will contain information relevant to each mail piece, the appropriate signature, and any required inserts.

The BNR contains information for setting up the intelligent inserters such as file totals, number of mail packets, and bin set up for those items being included in the mail packets and the total required in each bin. SSA provides a 3 of 9 barcode in the files they provide to the contractor. The BNR sheet provides the bin location for each insert used for each Mailer. The contractor has the option to modify the bin assignments for each Mailer, but because of the varying addresses of return envelopes required, they cannot merge Mailer files. SSA must approve any changes to bin assignments at any time during the course of this contract.

The contractor will also receive an electronic daily task order each morning after transmission. This file will contain the volumes of the notices, leaves, pages and any inserts required.

Prior to commencement of the production of orders placed under this contract, the Government will furnish test files shortly after the post-award conference. Test files will be used in performing the Pre-production Validation test and Pre-production Press and Mail Run test.

Files will be in print image format and in ZIP code sequence. Contractor will be required to sort files as necessary to obtain maximum USPS Postal discounts (i.e., leaf counts or mail weight).

Dataset Names for the following items will be provided at Post-award Conference:

- Print Resource Library (AFP) (for transmission or Email) - AFP resources including page and form definitions, fonts developed by SSA (not licensed), page segments and overlays (if applicable) for page formatting.
- Preproduction Press and Mail Run Test Files for Transmission - includes an AFP formatted print file with the corresponding MRD file and BNR file for each workload in the quantities required.
- Revised Resource Library (AFP) for Transmission or Email (when applicable) - includes AFP print resources, overlays, page segments and non-standard fonts provided shortly after the post-award conference may change during the term of the contract, in which case a revised AFP resource file will be electronically transmitted to the contractor as a replacement.

**PRINTER RESOURCES:** SSA will provide the AFP resources for each notice workload, unless licensed to SSA by another vendor, in which case that resource will need to be purchased by the contractor. These resources will be provided on the Contractor's choice of media (transmission or Email) shortly after the post-award conference. SSA will also provide test files for VPN transmission with samples of each workload to enable the start of the validation process. These test files may be used for the Preproduction Press and Mail Run test. (For additional information, see “PREPRODUCTION PRESS AND MAIL RUN TEST”.)

For proper processing of AFP resources supplied to the contractor by SSA, used for printing notices in AFP format, the contractor must have software or an operating system which is 100% compliant with the most recent release of the IBM MVS/ZOS operating system accompanied by the most recent release of IBM PSF. These compliances relate solely to interpreting and printing files to be provided to the vendor by SSA, to ensure the contractor is able to print the files as provided without alteration of any kind on the part of SSA. **It is solely the Contractor’s responsibility to redevelop/reprogram the AFP resources to ensure the proper printing in their environment.**

**Contractor must have knowledgeable programmer(s) capable of working with AFP resources.**

NOTE: The predominant data file format is AFP Mixed Mode; however, any valid AFP format is possible and must be printable at the contractor’s location.

The Contractor will be responsible for maintaining the AFP resources on each system that processes SSA's notices.

SSA will provide updated resources electronically, as necessary. When the Contractor receives an update to the printer resources, the Contractor shall install them immediately and provide SSA with 100 sample documents, representative of the workload involved, from the test file within one workday for review.
Contractor is to continue using existing resources while the samples are reviewed. Once the samples are approved, the contractor will be told when to start using the new resources. Whenever testing is required, the Contractor will be responsible for performing the test on each printer that will be used during actual production. Submit samples to SSA, Paul Campbell, OPAMS, 1361 Annex Building, 6401 Security Boulevard, Baltimore, MD 21235-6401.

During the term of the contract, the Government anticipates making programmatic changes to the daily notices as warranted (e.g., changes in language, format, appearance, etc.). When changes occur, SSA will perform testing of the workload in their print mail facility for a short period of time. (The "Dark Days" for the contractor should only last a few days.) Only those affected workloads (indicated by filename) will be held back at SSA for validation and production. For example, if the MES notice workload were to be changed, SSA would test and print those notices only. The contractor would continue to print and mail the Earnings MOD and Aurora notice workloads. Upon successful testing of the changes by SSA, SSA will then transmit the new print resources (if necessary) and resume transmission of the notice file(s).

**CONTRACTOR TO FURNISH:** All materials and operations, other than those listed under “GOVERNMENT TO FURNISH”, necessary to produce the products in accordance with these specifications.

The Contractor is required to have a Secure SFTP site set-up that will permit SSA to transmit files electronically. The site must allow SSA the ability to upload and download files for proofing and validation.

**TRANSMISSIONS:** Internet Protocol (IP) will be the connection protocol for the transmissions. The connectivity method will be through the Internet using an encrypted VPN tunnel or the Government will place an order for a dedicated circuit under GSA’s Networx contract to be installed within 60 to 90 calendar days between the contractor’s location and SSA’s network interface location. Either connectivity method will be encrypted with the AES256 encryption algorithm. For the Internet option to be used the contract must have an Internet ready VPN IPSec capable hardware device.

The Government will not be responsible for any cost associated with the VPN Internet connection the contractor may incur. The connection method is at the sole discretion of the Government. The cost of the dedicated circuit connection will be borne by the Government. The Government shall not be responsible for installation delays of data connections due to any external influences such as employee strikes, weather, supplies, etc., in which condition are beyond the control of the Government.

If a dedicated circuit is deemed necessary, SSA will provide the dedicated data connection, including a router, and firewall at the contractor’s specified locations. The contractor shall provide adequate rack space for the securing the router and firewall; the contractor shall provide a dedicated analog dial-up line within 8 feet of the router. This dedicated analog dial-up line will be used for router management and access for troubleshooting. The line must be in place and active prior to the installation of the circuit/router.

In addition, upon contract award, the contractor shall provide a complete delivery address citing the nearest cross street, contact name and phone number for installation of data transmission services and equipment. The contractor’s contact person shall be available for delivery of services at the specified location. The Government shall not be responsible for incorrect or lack of address information or non-availability of contract person(s) at the delivery site.

It is the contractor’s responsibility to notify SSA when systems or data line problems arise and transmission(s) cannot take place. SSA’s first point of contact for systems or data line problems shall be the Help Desk at 877-697-4889. The contractor must also notify OPAMS at Paul.Campbell@ssa.gov. or by Video Relay Phone: (410) 670-4588.

**FILE TRANSFER MANAGEMENT SYSTEM (FTMS) REQUIREMENTS:**

The contractor shall provide the capability to interface with SSA’s National File Transfer Management System (FTMS) for electronic transmission of notice files from SSA to the production facility. SSA will provide the necessary data connection into the contractor’s location. At the discretion of SSA, the line speed may be either increased or decreased depending on utilization.
The contractor must provide, at their expense, the equipment and operating software platform, and the file transfer software required at their location. The contractor assumes all responsibility for configuration, maintenance, and troubleshooting of their equipment and software.

In the event that any transmission cannot be processed due to media problems, link problems or data transmission circuit/ connection outages, the contractor shall notify SSA’s HELP DESK operations immediately at 877-697-4889 and report required observations and findings.

SSA utilizes, and the contractor must provide compatibility with Managed File Transfer (formerly known as Cyberfusion Integration Suite) software from TIBCO. The Contractor may implement the Managed File Transfer Platform Server that has embedded software encryption capable of being enabled. The personal computers/servers must have the capability to run Managed File Transfer software with encryption enabled using IP protocols on Windows, UNIX (i.e., IBM’s AIX, SUN or HP), or z/OS platforms.

SSA will not permit any private class A, B or C IP addresses, i.e., 10.xxx.xxx.xxx type IP addresses from external users on its network. At connection time to SSA, the Contractor will be provided a suitable IP address for access to SSA’s network via a firewall. SSA will provide the necessary subnet(s) for connection at the remote site. The contractor will be responsible for their own name/address translation to fulfill the intended purpose of data transfers. SSA will provide Managed File Transfer node information to the Contractor as required to accomplish file transfers.

The Contractor may determine the media type on which files from SSA will be received to the extent that operator intervention (e.g., a tape mount) is not required at SSA or the Contractor’s production facility. Simultaneous multiple transmission sessions must be possible on the Contractor’s equipment. All files transmitted by the SSA will be written as Physical Sequential or “flat” files at the Contractor’s location and will be distinguished with a “run date” in the Contractor’s file name. Virtual Storage Access Method files and Generation Data Groups, supported by IBM/MVS or IBM z/OS operating systems are not permitted under this contract. The contractor’s storage format must not preclude the availability of the Managed File Transfer software Checkpoint/Restart feature.

The contractor may not use VM/VSE/ESA on a mainframe system, as this hampers automated file transmission.

The contractor’s FTMS software shall be operational for the receipt of data files 24 hours per day, 7 days per week, unless otherwise specified by the Government. The communications protocol between SSA and the contractor shall be the Internet Protocol (IP). The contractor must specify the type of Local Area Network (LAN) connection that will be used at the location where the SSA connection is to be installed. The contractor is responsible for providing complete hardware and software compatibility with SSA’s existing network. Production file transfers will be established according to SSA’s standard procedures for transmission control, dataset naming, and resource security.

The contractor’s file management system must accommodate multiple file transmission sessions without intervention at either end. The contractor must have sufficient capacity to support the number of concurrent transmission file sessions as dictated by SSA.

The above will apply, regardless of the number of workloads transmitted to the contractor daily. If the contractor is awarded multiple SSA notice workloads, there must be sufficient capacity at the contractor’s production facility to accept transmission of all files according to their schedules.

Transmissions of production files shall be the standard automated technique. In the event the transmission network is unavailable for a time deemed critical by the Government, the files may, at the Government’s option, be processed at the SSA print mail facility.

The contractor shall notify SSA of any reprogramming and/or reformatting of data supplied by transmission necessitated due to the contractor’s method of production, within 2 hours of receipt of data.

All data provided by the Government or duplicates made by the contractor or his representatives and any resultant printouts must be accounted for and kept under strict security to prevent their release to any unauthorized persons. Data may not be duplicated in whole or in part for any other purpose than to create material to be used in the performance of this contract. The contractor must destroy any duplicate data and any resultant printouts. Contractor must retain all data for 21 workdays after mailing.
TRANSMISSION TEST, PRE-PRODUCTION VALIDATION TEST & 
PRE-PRODUCTION PRESS AND MAIL RUN TEST:

Prior to the commencement of production on the contract, the contractor will be required to demonstrate their ability to 
perform the contract requirements. The contractor will be required to perform the following tests: Transmission Test 
and 12-Hour Preproduction Press and Mail Run Test.

See page 48 of 59: TEST SCHEDULES

Transmission Test - After the appropriate bandwidth connection has been installed, the contractor will be required to 
receive within one (1) workday up to 204,000 notices ranging from an estimated 1-20 printed pages (average of 2 printed 
pages per notice). The contractor will be required to perform record count verification and perform the Coding Accuracy 
Support System (CASS) certification within one (1) workday after the complete transmission of all notice test files. The 
contractor will be required to copy the files to their own system and Email Paul Campbell at Paul.Campbell@ssa.gov the 
exact counts received (broken down by dataset name) before proceeding with any other processing. SSA will respond 
immediately for verification.

The contractor will be required to run the test file through their CASS certification system to ensure there are no 
problems with the reading of the address file. The contractor will be required to report to SSA with the test results. 
When the record count verification and CASS certification have been successfully completed, the contractor will be 
required to process the test files and provide SSA within two (2) workdays, 10 sample documents from the Transmission 
Test for each file (Mailers 1 through 17) transmitted during the test. Transmission Test notices do not require inserts 
and envelopes. Contractor will be required to submit test samples to SSA, Paul Campbell, OPAMS, 1361 Annex Building, 
6401 Security Boulevard, Baltimore, MD  21235-6401

The Government will approve, conditionally approve, or disapprove the samples from the Transmission Test within two 
(2) workdays of receipt thereof. Approval or conditional approval shall not relieve the contractor from complying with 
the specifications and all other terms and conditions of the contract. A conditional approval shall state any further action 
required by the contractor. A notice of disapproval shall state the reasons thereof.

Note: If errors are found, additional samples will be required until the validation produces no errors.

Pre-Production Validation Test - Prior to commencement of production of orders placed under this contract, the 
Government will furnish electronic test files shortly after the post-award conference to be used in performing a Pre-
Production Validation Test and Pre-Production Press and Mail Run Test.

Prior to commencement of production of orders placed under this contract, and within five (5) workdays after 
Government approval of test samples, the contractor shall conduct a pre-production validation test and furnish at least 
425 samples notices (25 samples from each mailer) from the electronic test files. Notices must be complete and include 
all variable data from Government furnished files. Inserts and envelopes will be required; however, the contractor will be 
notified if SSA decides to waive this requirement. The container and accompanying documentation shall include the 
GPO jacket, purchase order and program number, and shall be submitted to the attention of SSA, Paul Campbell, 

The Government will approve, conditionally approve, or disapprove the samples from the Pre-Production Validation 
Test within five (5) workdays of receipt thereof.

Approval or conditional approval will not relieve the contractor from complying with the specifications and all other 
terms and conditions of the contract. A conditional approval shall state any further action required by the contractor. A 
otice of disapproval will state the reasons thereof.

Pre-Production Press And Mail Run Test - The Contractor will be required to demonstrate their ability to perform the 
contract requirements, prior to commencement of actual production, by performing a 12-hour preproduction press and 
mail run test utilizing test files transmitted electronically shortly after the post-award conference.

During the 12-hour period, the contractor will be required to print and prepare for mailing the following quantities of 
Earnings MOD, MES, and Aurora notices:
The contractor must perform the Earnings MOD, MES, and Aurora Preproduction Press and Mail Run Test on the equipment they intend to use during live production and using their personnel. This test must be conducted during normal business hours, Monday through Friday. The test will incorporate all aspects of the program consisting of the receipt of transmitted data; the duplex/imaging (and simplex imaging when an odd page is required) of notices; gathering; folding; binding; inserting; metering (if approved by SSA under certain circumstances); presorting; and preparing finished notices for delivery to the USPS. This must include any reprints required during the course of this test. To simulate actual production conditions the product produced must be in accordance with all contract specifications and all USPS regulations. The contractor will be required to have all composition, proofing, printed pamphlets/leaflets/fact sheets, forms, and envelopes necessary for the test, completed prior to beginning the test. Contractor must have adequate supplies on hand to complete the test. Mailers are to be completed in accordance with contract requirements, inserted into correct envelopes, and prepared for mailing.

The contractor must produce a minimum of 34,949 notices in a continuous 12-hour period that will prove to the Government representatives the contractor can satisfactorily complete the requirements of this contract during live production. The 12-hour period for the printing process will begin when the Government representative give an “Okay to Print” on-site. The inserting and mailing process will begin when the contractor has sufficient materials printed to begin the inserting process. The printing, inserting and mail process must be completed in the continuous 12-hour period.

All samples shall be manufactured at the facilities in which the contract production quantities are to be manufactured. Samples of the preproduction press and mail run test will be brought back to SSA for validation. The Government will approve, conditionally approve, or disapprove the samples within seven (7) workdays of receipt thereof. Submit these samples to SSA, Paul Campbell, OPAMS, 1361 Annex Building, 6401 Security Boulevard, Baltimore, MD 21235-6401.

Systems Change/Signature Change/New Notice Files Validation Test - When required, the Government will furnish test files for transmission used in performing programming of a Systems Changes/Signature Change/New Notice Files Validation Test.

This test is required whenever SSA initiates a systems/programming change, a signature change, or when a new notice workload is developed. The contractor shall furnish up to 100 printed samples. The Government has the option to waive the insertion of enclosure(s)/outgoing envelope.

The Government will approve, conditionally approve, or disapprove the samples within seven (7) workdays of receipt thereof. Submit these samples to SSA, Paul Campbell, OPAMS, 1361 Annex Building, 6401 Security Boulevard, Baltimore, MD 21235-6401.

The Systems Changes/Signature Change/New Notice Files Validation Test must occur without a break in production of any SSA daily notices. The Government will inform the contractor in advance when the regular daily transmissions will contain the systems changes.

NOTE: Failure of the contractor to perform any of the start-up tests (i.e., Pre-Production Validation Test, Transmission Test, and Pre-production Press and Mail Run Test) and/or the Systems Changes/Signature Change/New Notice Files Validation Test) during the course of the contract satisfactorily may be cause for default. The Government reserves the right to waive the requirements of any of these tests. Contractor will be notified at the post-award conference if any start-up test(s) is to be waived.
COMPOSITION: Contractor will be required to set type the envelopes. Helvetica or similar typeface will be utilized.

Century Schoolbook or Times New Roman are the approved fonts for producing the notices. SSA will provide the font part numbers to the contractor who will validate that they have the proper licenses for each required font.

The Intelligent Mail Barcode (IMB) font will be required for the start of this contract. The contractor will be required to obtain the necessary font; SSA will not provide it with the Resources supplied.

Aurora notices (Mailers 9 – 17): Numeric scan line shall be printed using the OCR-A font (applies to approximately 2% of notices).

PROOFS: Proofs of the envelopes, publications and forms will be required and should be included in base costs for the initial order. Any time a copy change may be required during the term of the contract proofs will also be required at the Government’s option.

Envelopes:

Three (3) sets of digital color content proofs will be required for each envelope. Proofs must have all elements in their proper position (not pasted up), imaged face and back, trimmed and folded to the finished size of the product. Direct to plate must be used to produce the final product with a minimum of 2400 x 2400 dpi. Proofs must be created using the same Raster Image Processor (RIP) that will be used to produce the product.

Publications (pamphlets, leaflets, fact sheets) and Forms:

NOTE: SSA uses many of the same publications and forms in several of its print contracts. To reduce the proofing requirements for any revisions, if it is determined after award you are responsible for the production of any other SSA workloads containing the same publications and/or forms required for this program, then the revisions may be proofed using one of these other programs.

Three (3) sets of digital color content proofs will be required for each publication. Proofs shall be collated with all elements in proper position (not pasted up), imaged face and back, trimmed and folded to the finished size of the product. Direct to plate must be used to produce the final product with a minimum of 2400 x 2400 dpi. Proofs must be created using the same Raster Image Processor (RIP) that will be used to produce the product.

At the Government’s option:

PDF proofs
Contractor to submit a “Press Quality” PDF “soft” proof (for content only) using the same Raster Image Processor (RIP) that will be used to produce the final printed product. PDF proof will be evaluated for text flow, image position, and color breaks. Proof will not be used for color match.

E-Mail PDF Proof to: Paul Campbell (mail to: paul.campbell@ssa.gov). Follow up with phone call to 410 670-4588 (Video Relay Phone) confirming receipt.

Digital one-piece composite laminated halftone proofs
Proofs must be created on the actual production stock (Kodak Approval, Polaroid PolaProof, CreoSpectrum, or Fuji Final Proof) with a minimum resolution of 2400 x 2400 dpi. Proofs must have margins indicated and have all elements in their proper position.

Proofs must contain color control bars (such as Brunner, GATF, GRETAG, or RIT) for each color of ink on the sheet. Control bars must be placed parallel to the press’s ink rollers and must show areas consisting of minimum 1/8” x 1/8” solid color patches; tint patches of 25, 50 and 75%; dot gain scale; and gray balance patches for process color (if applicable). These areas must be repeated consecutively across the sheet. Proofs must show dot structure.
The make and model number of the proofing system utilized shall be furnished with the proofs. These proofs must contain all elements, be in press configuration and indicate margins. Proofs will be used for color match on press. Direct to plate must be used to produce the final product with a minimum of 2400 x 2400 dpi.

Pantone colors may be substituted with a similar color (with the exception of process yellow) but may not be built out of the four process colors.

Contractor may be required to submit ink drawdowns on actual production stock of Pantone colors used in job.

The Government may require one or more sets of revised proofs before rendering an “OK to Print”.

SSA reserves the right to make changes to all proofs. The Government may require one or more sets of revised proofs before rendering an “Okay to print”.

If any Contractor’s errors are serious enough in the opinion of the GPO to require revised proofs, the revised proofs are to be provided at no expense to the Government. No extra time can be allowed for this reproofing operation; such operations must be accomplished within the original production schedule allotted in the specifications.

If any Author’s Alteration’s (AA’s) require additional proofs, the Government will allow for additional time to process this additional requirement and will incur these costs under line Item I. COMPOSITION (c) and (d).

See page 53 of 59: SCHEDULE OF PRICES, COMPOSITION

The Contractor must not print to prior to receipt of an “OK to print.”


Color of paper furnished shall be of a uniform shade and a close match by visual inspection of the JCP and/or attached color sample(s). The Contracting Officer reserves the right to reject shipments of any order printed on paper the color of which, in his opinion, materially differs from that of the color sample(s).

Personalized Notices: White Offset Book, basis weight: 50 lbs. per 500 sheets, 25 x 38”, equal to JCP Code A60.

Mail-Out Envelope: 4-1/8 x 9-1/2" - White Wove, basis weight: 24 lbs. per 500 sheets, 17 x 22" bursting strength 24 lb./in², or at contractor's option, White Offset Book, basis weight: 60 lbs. per 500 sheets, 25 x 38", equal to JCP Code A60.

Mail-Out Envelope: 6-1/8 x 9-1/2" (two envelopes with different return addresses) – White Kraft, basis weight: 24 lbs. per 500 sheets, 17 x 22”, bursting strength 38 lb/in².

Business Reply Mail (BRM) Refund Envelopes: Green stock (PMS 344 or equivalent)/ Goldenrod (PMS 127 or equivalent), basis weight: 20 lbs. per 500 sheets, 17 x 22” bursting strength 20 lb/in² containing a minimum of 50% waste paper.

NOTE: At contractor's option, the green /goldenrod BRM refund envelopes may be surface tinted. Surface tinting must cover all exposed surfaces (front and back) of the envelope when sealed.

Envelope color must meet USPS print reflectance difference requirements.

Courtesy Reply Mail (CRM) Envelopes: Any white stock, basis weight: 20 lbs. per 500 sheets, 17 x 22” bursting strength 20 lb/in² containing a minimum of 50% waste paper.

Pamphlets, Leaflets and Fact Sheets: White Offset Book, basis weight: 60 lbs. per 500 sheets, 25 x 38”, equal to JCP Code A60.

Form CMS-2690: Yellow Index, basis weight: 90 lbs. per 500 sheets, 25½ x 30½”, equal to JCP Code K10.
Form SSA-3105, Form SSA-L4360-SP, Form SSA-3885, Form SSA-4111, Form SSA-150, Form SF-180, Form SF-1588, Form SSA-4588-OP1 thru OP6, Form SSA-21, Form SSA-1724, and Form SSA-1372-BK:

White C.W. Writing, basis weight: 20 lbs. per 500 sheets, 17 x 22", equal to JCP Code D10, or at contractor's option, White Offset Book, basis weight: 50 lbs. per 500 sheets, 25 x 38", equal to JCP Code A60.


PRINTING/IMAGING: The Government reserves the right to make changes to the envelopes or the format(s)/text of the pamphlets, leaflets, factsheets, and/or forms at any time during the term of the contract. Notification of a proposed change will be given with sufficient time for the contractor to allow for the change, and submit proofs to the Government. Therefore, the contractor is not to preprint or maintain more than a 90-calendar day surplus/inventory of any of the components required on this contract with the exception for inserts listed under “PUBLICATION AND FORM INSERTS—AURORA” (See page 33 of 57) where the yearly volume is expected to be less than 250. The Government will not be required to purchase from the contractor the surplus/inventory of any component remaining on hand in excess of what was authorized when an envelope or format/text change is implemented. The cost for an increase or decrease in booklet page counts can only be charged at the prices (per page) currently in the Schedule of Prices in the contract. No additional charges may be incurred.

The contractor will have eleven (11) workdays following proof approval to stock and begin using revised pamphlets/leaflets/fact sheets/forms required for the program. Within five (5) workdays of stocking the revised pamphlets/leaflets/fact sheets/forms, the Contractor will be required to report to SSA the remaining balance of the outdated stock for reimbursement. In some cases, SSA will require the contractor to exhaust the old stock before using the new stock. The instruction to destroy or exhaust stock will be issued with the new artwork.

Contractor will be required to convert the furnished data from electronic transmission for either laser or ion deposition printing. All imaging/printing must have a minimum resolution of 300 x 300 dpi.

NOTICES

Earnings MOD, MES, and Aurora are simplex (face only), and duplex (face and back, head-to-head) printed/imaged in black ink. Approximately 50% of all notices will print/image duplex (face and back). The balance of the notices will require a combination of simplex and duplex printing/imaging.

Spanish notices consist of two (2) parts:

- The first part is the Spanish notice;
- The second part is the same notice in English.

ENVELOPES

Envelopes print face and back after manufacture in black ink. Printing shall be in accordance with the requirements for the style envelope ordered. All printing shall comply with all applicable USPS. The envelope shall accept printing without feathering or penetrating to the reverse side.

Mail-out Envelopes (4-1/8 x 9-1/2"/6-1/8 x 9-1/2"): Envelopes require a security tint (lining is acceptable) printed on the inside (back - before manufacture) in black ink. Contractor may use his own design but must guarantee that the product will ensure complete opacity and prevent show through of any material contained therein.

BRM (3-7/8 x 8-7/8"): Face of envelope to be in BRM format. Print FIM and IMB’s using the camera ready positive provided (one (1) BRM). The FIM and IMB should be placed on the mailing piece according to the current USPS Domestic Mail Manual. The envelope will require a security tint (lining is acceptable) printed on the inside (back - before manufacture) in black ink.
Contractor may use his own design but must guarantee the product will ensure complete opacity and prevent show through of any material contained therein. Inside of the envelope must contain a clear area (no pantograph design), approximate size 3-1/2 x 5/8”, behind the IMB to ensure readability by USPS equipment.

CRM (3-7/8 x 8-7/8”): Face of envelope to be in CRM format. Print FIMs and IMB’s using the camera ready positives provided (Mailer 2 {RECON}, Mailers 9 -17 (Aurora) and CMS Refund Envelope). The FIMs and IMB’s should be placed on the mailing piece in accordance with the current USPS's Domestic and International Mail Manuals. The envelope will require a security tint (lining is acceptable) printed on the inside (back - before manufacture) in black ink. Contractor may use his own design but must guarantee the product will ensure complete opacity and prevent show through of any material contained therein. Inside of the envelope must contain a clear area (no pantograph design), approximate size 3-1/2 x 5/8”, behind the IMB to ensure the readability by USPS equipment.

**PAMPHLETS** - Print head-to-head with self-covers printing in two Pantone ink colors and bleeding three (3) sides; balance of text and self-cover pages print in two (2) Pantone ink colors and contain adequate gripper margins. Match Pantone ink colors specified on Print Order.

**LEAFLETS** - Print face and back, head-to-head. Face prints in two Pantone ink colors and bleeds one side; back prints in two Pantone ink colors and contains adequate gripper margins. Match Pantone ink color specified on Print Order.

**FACT SHEETS** - Prints face and back in two Pantone ink colors and contains adequate gripper margins. Match Pantone ink colors specified on Print Order.

**FORMS**

Form SSA-L4360-SP: Prints one side only in black ink.

Form CMS-2690, Form SSA-3105, Form SSA-3885, Form SSA-4111, Form SSA-150, Form SSA-1588, Form SSA-4588-OP1 thru OP6, Form SSA-21, Form SSA-1724 and Form SSA-1372-BK: Prints face and back, head-to-head in black ink.

Form SF-180: Prints face and back, head-to-head in black ink (page 4 is blank).

Form SSA-561-U2: Text is identical on face of both parts except for copy designations on Part 1 and Part 2.

Form SSA-1560-U4: Print all parts in black ink, copy designations may be printed in red or black ink. Text is identical on FACE of all parts except for copy designations. Text on BACK of Parts 1, 3 and 4 is identical. BACK on Part 2 differs from other parts.

**NOTE:** The Contractor is required to insert a date onto the face of each Form CMS-2690. The form must be dated 60 calendar days in the future from the actual mailing date. However, if a Federal Holiday(s) falls within the 60 calendar days, the contractor should not include the Federal Holiday in their calculation and should go to the next available workday (e.g., Actual mail date is July 12, 2010 and the CMS-2690 would require a date of October 4, 2010.) Federal Holidays are as follows:

- New Year’s Day
- Martin Luther King’s Birthday
- Presidents’ Day
- Memorial Day
- Independence Day
- Labor Day
- Columbus Day
- Veterans Day
- Thanksgiving Day
- Christmas Day

**RECYCLED PAPER LOGO AND LEGEND:**

See Government Paper Specification Standards No. 12 for recycled content requirements.

**Notices and Envelopes:** When recycled paper is required, print the logo and legend in black ink.

**Notices** – The contractor will digitize the recycled paper logo and legend. The contractor will image the logo and legend in the bottom right corner aligned with the contractor’s control number on the first page of each notice. For bilingual notices, the logo will appear on the Spanish copy only.
Envelopes – The logo and legend will print on the back of all envelopes in the bottom left corner.

Pamphlets, Leaflets, and Fact sheets: When recycled paper is required, the recycled paper logo and legend must print in the same Pantone ink color as the text. The SSA furnished camera copy, negative(s), PDF file, or electronic media will contain the recycled paper logo and legend in either English or Spanish (as appropriate).

Forms: When recycled paper is required, the logo and legend must print in the same Pantone ink color as the text. Forms do not contain the recycled logo or legend. Contractors are to image the recycled logo and legend using the GFM (logo and legend) furnished at post-award. The recycled logo should appear at the bottom of all face only forms, at the bottom of the back on face and back forms, or at the bottom of the last printed page for folded forms.

PRESS SHEET INSPECTION: Final make-ready press sheets may be inspected and approved for each item listed in this contract, at the Contractor’s (subcontractor’s) plant for the purpose of establishing specified standards for use during the actual press run. Upon approval of the sheets, Contractor is charged with maintaining these standards throughout the press run (within QATAP tolerances when applicable) and with discarding all make-ready sheets that preceded approval. See GPO Publication 315.3 (Guidelines for Contractors Holding Press Sheet Inspections) issued August 2002.

NOTE: A press sheet inspection is for the purpose of setting specific standards that are to be maintained throughout the entire run. It does not constitute a prior approval of the entire run.

At the time of the press inspection, SSA officials will fax copies of the finished product for each version to the agency. SSA, Baltimore, MD, will confirm the accuracy of the variable data prior to the approval of the press sheet(s).

PRODUCTION INSPECTION: Production inspection(s) may be required at the Contractor’s and/or Subcontractor’s plant for the purpose of establishing the receipt of transmitted files, the printing of pamphlets, leaflets, fact sheets, and forms, imaging, dating of form inserts, collating, folding, binding, inserting and mailing is being accomplished in accordance with contract quality attributes and requirements.

NOTE: A production inspection is for the purpose of setting specific standards to be maintained throughout the duration of the contract.

Before production begins on any new workloads, a production inspection(s) may be required at the contractor’s plant.

MARGINS: Will be indicated on print order, sample, or electronic file.

CONSTRUCTION/BINDING:

Notices: Gather all pages of a notice in numerical sequence. Notices are to be nested together with all faces forward. Fold from a flat size of 8-1/2 x 11” down to 8-1/2 x 3-11/16” or 8-1/2 x 5-1/2” as indicated and insert into the appropriate envelope with title out. Address on first page of notice must be visible through the window of mail-out envelope. Either wraparound or accordion folds will be acceptable for the tri-fold notices.

Types of Notices:

- English Only
- English notice with a Spanish cover letter
- Bilingual Spanish/English notices consist of the first three paragraphs in Spanish with the remainder of the notice in English
- Spanish/English notices consist of two parts. The first part is a Spanish notice; the second part is the same notice in English (two parts must be nested together)
- Mailers 9-17 (Aurora) contain third party notices - First page of a third party notice prints as an address to one of the following: Administrative Law Judge (ALJ), attorney, NOE Copy or a Representative for the beneficiary (Rep Payee). Subsequent pages in third party notices print as duplicate notice (original copy of this notice is also in an Aurora file to be printed separately) addressed to a SSA beneficiary.
Mail-out Envelope (4-1/8 x 9-1/2""): Envelope must be open side, with gummed fold-over flap for sealing and contain high cut diagonal seams or double side seams. Flap depth is at the contractor’s option, but must meet all USPS requirements and flap must be coated with a suitable glue that will securely seal the envelope without adhering to contents, not permit resealing of the envelope and permit easy opening by the recipient. Face of envelope to contain a 1-1/4 x 4-1/4” die-cut address window with slightly rounded corners. Die-cut is to be located 1/2” from the bottom edge of the envelope and 3/4” from the left edge of the envelope (the long dimension of the window is to be parallel to the long dimension of the envelope).

Contractor has the option to adjust the size of the window opening (subject to Government approval), providing the visibility of the computer generated mailing address and IMB on the notice is not obscured, and other extraneous information is not visible when material is inserted into the envelope.

Window is to be covered with a suitable poly-type transparent, low-gloss material that must be clear of smudges, lines, and distortions. Poly-type material must be securely affixed to the inside of the envelope so as not to interfere with insertion of contents. Window material must meet the current USPS readability standard/requirements.

Mail-out Envelope (6-1/8 x 9-1/2") : Envelope must be open side, with gummed fold-over flap for sealing. Flap depth is at the contractor’s option but must meet all USPS requirements and flap must be coated with a suitable glue that will securely seal the envelope without adhering to contents, not permit resealing of the envelope and permit easy opening by the recipient. Face of envelope to contain a 1-1/2 x 4-1/4” die cut address window with rounded corners. Die cut is to be located 2” from the bottom edge of the envelope and 3/4” from the left edge of the envelope. The long dimension of the window is to be parallel to the long dimension of the envelope.

Contractor has the option to adjust the size and position of the window opening (subject to Government approval), providing the visibility of the computer-generated mailing address and IMB on the notice is not obscured, and other extraneous information is not visible when material is inserted into the envelope. Window is to be covered with a suitable poly-type transparent, low-gloss material that must be clear of smudges, lines, and distortions. Poly-type material must be securely affixed to the inside of the envelope so as not to interfere with insertion of contents. Window material must meet the current USPS readability standard/requirements.

BRM /CRM Reply Envelopes (3-7/8 x 8-7/8") : Envelope must be open, with gummed fold-over flap for sealing and contain high cut diagonal seams or double side seams. Flap is at contractor’s option, but must meet all USPS requirements and flap must be coated with suitable remoistenable glue that will securely seal the envelope for mailing. (Adhesive must not adhere to the contents of the envelope.)

Pamphlets (SSA Publication Numbers 05-10095, and 05-10137): Saddle-wire stitch in two places across the 8” dimension and trim three sides to 3-1/2 x 8”. Each product must contain complete 4-page signatures after trimming. Single leaves connected with a lip (i.e., binding stub) to left or right side of stitches will not be allowed.

Pamphlets (SSA Publication Numbers 05-10153, 05-10076, and 05-10077): Saddle-wire stitch in two places across the 8” dimension and trim three sides to 5-1/4 x 8”. Each product must contain complete 4-page signatures after trimming. Single leaves connected with a lip (i.e., binding stub) to left or right side of stitches will not be allowed.

Leaflets (SSA Publication Number 05-10018): Fold from a flat size of 10-1/2 x 8” to 3-1/2 x 8”; title out, with two folds. Follow furnished folding sample.

Leaflets (SSA Publication Numbers 05-10072, and 05-10958): Fold from a flat size of 14 x 8” to 3-1/2 x 8”; title out, with three folds. Follow furnished folding sample.

Leaflets (SSA Publication Numbers 16-002, 05-10069, and 70-10281): Fold from a flat size of 17-1/2 x 8” to 3-1/2 x 8”; title out, with four folds. Follow furnished folding sample.

Leaflet (SSA Publication Number 70-10283): Fold from a flat size of 21 x 8” to 3-1/2 x 8”; title out, with five folds. Follow furnished folding sample.

Fact Sheets (SSA Publication Numbers 05-10007, 05-10045, and 05-10075): Fold from a flat size of 8-1/2 x 11” down to 8-1/2 x 5-1/2” with one fold, addressee out.

Form CMS-2690: Trim four sides to 8-1/2 x 3-1/2".
Form SSA-3105: Perforate on the fold 7" from left edge (panel 3). Perforation to run along the entire 8" dimension. Fold from a flat size of 10-1/2 x 8" down to 3-1/2 x 8" with two parallel wraparound folds, title out.

Form SSA-L4360-SP: Fold from a flat size of 8-1/2 x 11" down to 8-1/2 x 5-1/2" title out.

Form SSA-4111; Form SSA-3885: Fold from a flat size of 8-1/2 x 11" down to 8-1/2 x 5-1/2" title out.

Form SSA-150: Drill two 9/32" round holes centered on left side, 2-3/4" center-to-center; center of holes to be 3/8" from edge of paper. Fold from a flat size of 8-1/2 x 11" down to 8-1/2 x 5-1/2" title out.

Form SSA-561-U2: 2-part chemical transfer stub-less bound set held together at the top (8-1/2") edge by adhesive providing sufficient strength to guarantee parts will remain together under normal handling and storage, but permit ready separation of parts without damage to the parts. Fold from a flat size of 8-1/2 x 11" down to 8-1/2 x 5-1/2" title out.

Form SSA-1560-U4: 8-1/2 x 11-5/8" (includes 5/8" binding stub). NCR paper - Four (4) part carbon-interleave snap-out set, with top stub along 8-1/2" dimension. Registrations: All parts NCR. Perforation: Perforate top stub along the entire 8-1/2" dimension for disassembly of paper parts.

Punching: Two (2) round holes in Parts 1 and 4 only. Holes are to be 1/4" in diameter, centered on the left margin, 2-3/4" center-to-center. Margins for all Parts: FACE: Top –1/4" to top of first line of print, Left – 5/8" and BACK: Top – 1/4" to first line of print, Right – 5/8". Bi-fold form in outgoing envelope.

Form SF-180, Form SSA-1588 and Forms SSA-4588-OP1 through OP6: Fold from a flat size of 17 x 11" to 8-1/2 x 11" then to 8-1/2 x 5-1/2" title out.

Form SSA-21 and Form SSA-1724: Drill two 9/32" round holes centered on left side, 2-3/4" center to center; center of holes to be 3/8" from the left edge of paper. Fold from a flat size of 17 x 11" to 8-1/2 x 11" then down to 8-1/2 x 5-1/2" title out.

Form SSA-1372-BK: 8-page paste on fold booklet. Paste on fold across the 11" dimension, trim three sides to 8-1/2 x 11". Perforate all pages 1/4" from left edge along the entire 11" dimension. Drill two 9/32" round holes centered on left side, 2-3/4" center-to-center; center of holes to be 3/8" from edge. Bi-fold form for use in outgoing envelope.

PACKING:

Gather the appropriate number of leaves per notice, fold and insert into mail-out envelope with recipient’s name and address on first page facing out for visibility through window envelope. It is the contractor’s responsibility to assure that only the computer-generated address and IMB on the notice will be visible through the window in the envelope and that only one notice is inserted into each envelope. When required, pamphlet(s), leaflet(s), form(s), and/or return envelope(s) should be inserted behind the notice (when viewed from the window side of the envelope).

- **Bilingual Spanish/English notices** - Recipient’s name and address on the Spanish notice should be visible through the window envelope. (Note: the bilingual Spanish/English notices must be nested together.).

- **Third Party Notices** (Aurora files Mailers 9-17) - First page of a third party notice prints as an address to one of the following: Administrative Law Judge (ALJ), attorney, NOE Copy or a Representative for the beneficiary (Rep Payee). Subsequent pages in third party notices print as a duplicate notice, addressed to a SSA beneficiary. (The original notice to the SSA beneficiary is also part of Aurora, but will be printed separately.) Notice showing Third party’s name and address should be visible through the window envelope. The SSA beneficiary’s notice should be inserted behind the third party notice (when viewed from the window side of the envelope).

**SPECIAL MAILING REQUIREMENTS:** There are multiple workloads under this contract. Earnings MOD consists of various weight pieces. MES consists of identical mail pieces that may be prepared under Permit Imprint G-11 if the daily workload consists of at least 200 identical mail pieces or 50 pounds. This workload will be prepared as Automation rate First-class mail. Aurora has various weight pieces with multiple inserts and a USPS-approved Manifest Mail system may be used.

On each GPO print order invoice, the contractor must complete the following four steps to determine if the requirement has been met or if the invoice needs to be adjusted:
Step 1: Quantity of pieces mailed (for each weight class) multiplied by the current corresponding USPS MIXED AADC rate to arrive at a “Postage to be Paid”.

Step 2: Add the “Postage to be Paid” together with the actual postage cost for “All other Mail” to arrive at a “Total Postage to be Paid” for that print order.

Step 3: Subtract the “Total Actual Postage Paid” from the “Total Postage to be Paid” for the entire print order to arrive at the “Difference”. If the “Total Actual Postage Paid” is equal to or less than the “Total Postage to be Paid” the GPO invoice will not be adjusted. If the “Total Actual Postage Paid” is greater than the “Total Postage to be Paid” the contractor shall deduct the “Difference” from the GPO invoice.

Step 4: The contractor must attach all corresponding USPS and GPO mail documentation supporting this information with the GPO Invoice with copies forwarded to: SSA, Paul Campbell, 1361 Annex Building, 6401 Security Boulevard, Baltimore, MD 21235-6401.

Note: The Government will furnish an Official Government Postage Meter for volumes of notices that do not meet USPS minimum requirements for permit imprint. Postage meter replenishments are done by the contractor and the funds come from a Government account.

On the first workday of each month, the contractor must load a minimum of $5.00 per month on all postage meters used in this contract. This action generates a monthly report from the meter company that will allow the Agency to accurately account for postage meter expenditures. NOTE: This is in addition to any other loading of postage.

DOMESTIC FIRST-CLASS LETTER-SIZE MAIL: The contractor is required to prepare domestic First-Class letter-size mail in accordance with appropriate USPS rules and regulations, including the USPS Domestic Mail Manual and Postal Bulletins, in effect at the time of the mailing.

The Contractor is required to prepare Domestic First-Class letter-size mail pieces and obtain the maximum postage discount allowed by USPS in accordance with the appropriate USPS rules and regulations, including USPS Domestic Mail Manual, and Postal Bulletins on Automation-Compatible First-Class Domestic Mail Automated and Non-automated mail discount structure in effect at the time of the mailing; a) Automation (5-digit); (b) Automation (3-digit); (c) Automation (AADC); (d) Automation (Mixed AADC); (e) Non-automation (Presorted); and (f) Non-automation (Single Piece).

Contractor will be required to presort all mail in this contract and achieve USPS automated postal rates. To achieve the maximum automation compatible postal discount, the contractor is required to either presort the notices prior to printing or sort the mail after the notices are inserted. The contractor may use a Presort subcontractor for the mailing portion of the contract. SSA has the right to inspect the subcontractor for the security of the mailing operation and compliance with the contract. ALL PIECES WITHOUT BARCODES MUST BE SEPARATED and mailed as a non-automation rate single piece mailing. The contractor must disclose how they will achieve maximum postage discounts as required in the contract.

NOTE: Mail addressed to United States territories and possessions (e.g., American Samoa, Federated States of Micronesia, Guam, Marshall Islands, Northern Mariana Islands, Palau, Puerto Rico, Virgin Islands, Wake Island, and Military Overseas Addresses (APO/FPO mail) is Domestic Mail, not International Mail and should be included in the discount sorting.

The contractor must use SSA’s “First-Class Mail Postage and Fees” permit imprint mailing indicia printed on each mail piece. Each mail piece sent under this payment method must bear a permit imprint indicia showing that postage is paid. Permit imprint indicia may be printed directly on mail pieces. Permit imprint mailings must contain at least 200 identical pieces or 50 pounds. The contractor is cautioned to use the permit imprint only for mailing material produced under this contract.

If there is insufficient volume to use Permit Imprint, the mail must be metered and any permit imprint must be covered/concealed by a meter strip. All meter supplies will be borne by the contractor.
The contractor is strongly encouraged to use manifest mail when postal regulations allow. To manifest mail the contractor must have a Manifest Mailing System (MMS) for First-Class Mail, which has been approved by USPS to document postage charges for this mailing. Each mail piece must be identified with a unique identification number or key line containing a unique identification number and rate information about the piece. Requirements for the MMS are contained in Publication 401 “USPS Guide to the Manifest Mailing System” in effect at the time of the mailing. A copy of the USPS approval for the MMS must be presented at the post-award conference.

**NOTE:** Contractor will be required to produce and use a USPS IMB Full Service option and achieve the postage discounts available with this option. The contractor will be required to comply with USPS requirements and place the IMB on all notices/mail pieces of this workload.

The contractor is required to be capable of achieving the postage discounts available with the Full-Service option of the IMB program. The full service option requires the contractor to use Postal One.

**NOTE:** The contractor is responsible for producing and providing all reporting data required for acceptance and processing of full service mail required by USPS for the IMB. IMB, delivery address placement, and envelopes used for the mailing are among the items that must comply with USPS requirements for automation-compatible mail in effect at the time of the mailing.

In addition, USPS has instituted a verification procedure called a “tap” test. This test is used to screen all mailings with barcoded inserts for proper barcode spacing within the envelope window. When the insert showing through the window is moved to any of its limits inside the envelope, the entire barcode must remain within the barcode clear zone. In addition, a clear space must be maintained that is at least 0.125” between the left and right edges of the window, and at least 0.028” clearance between the IMB and the top and bottom edges of the window.

All letters in a mailing must pass the “tap” test in order to obtain the maximum postal discounts for the ordering agency. The contractor will be responsible for payment of any additional postage resulting from a loss of postage discounts due to failure to pass the “tap” test because of inaccuracy or failure to conform to USPS specifications.

Contractor should be aware that USPS uses the Mail Evaluation Readability Look-up Instrument (MERLIN) to evaluate barcodes. If MERLIN is in effect in the contractor’s geographic area, the contractor must ensure that all barcoded mail meets the new barcode standards. The contractor will be responsible for payment of any additional postage resulting from a loss of such discounts due to failure of the contractor-generated barcodes to pass the MERLIN test because of inaccuracy or failure to conform to USPS specifications.

**NATIONAL CHANGE OF ADDRESS (NCOA) AND CODING ACCURACY SUPPORT SYSTEM (CASS):**

Earnings MOD, MES, and Aurora notices will be National Change of Address (NCOA) and Coding Accuracy Support System (CASS) certified by SSA and the appropriate documentation will be provided at the post-award meeting. Updated NCOA and CASS certificates will be provided to the contractor throughout the duration of the contract as required by the USPS Domestic Mail Manual.

Should the contractor be required to use the latest move update software approved by USPS that uses “INDIVIDUAL” match logic, the matches must be made on the addressee’s first name, middle initial and last name. Matching on “ENTIRE FAMILY” moves is unacceptable. Contractor must provide any documentation of the move update software process required by USPS. The contractor must ensure that no portion of the mailing envelope window protrudes into the barcode clear zone as specified in DMM 202.5.0 and the update software license agreement. **NOTE: The move update software version, which changes the addresses prior to printing, is not acceptable.** ALTERNATE: If the contractor cannot process the mail through a MLOCR with the latest move update software approved by USPS at time of mailings and still meet SSA’s deadlines, then the “ADDRESS SERVICE REQUESTED” endorsement must appear on the envelopes in one of the locations approved by USPS.

**USPS CERTIFIED MAIL:**

The domestic mail pieces included in these mailings may be required to be mailed using USPS Certified Mail. The contractor will prepare these mail pieces according to USPS regulations contained in the Domestic Mail Manual (DMM) under Section 503.3.0, Certified Mail.
Notices associated with the certified mail file shall be inserted into envelopes and processed as certified mail. The contractor must place the current Postal Service Form 3800 (20 digit certified number and barcode) on the envelope.

**USPS INTERNATIONAL REGISTERED MAIL:**

The mail pieces included in these mailings may be required to be mailed using USPS International Registered Mail. The contractor will prepare these mail pieces according to USPS regulations contained in the International Mail Manual (IMM) under Section 330, Registered Mail.

Notices associated with the registered mail file shall be inserted into envelopes and processed as international registered mail. The contractor must place the current Postal Service Form 3806 (Receipt for Registered Mail) and PS Label 200 (13 digit registered number and barcode) on the envelope.

**INTERNATIONAL MAIL:**

All items mailed must conform to the appropriate USPS International Mail Manual (IMM), Postal Bulletin, and other USPS rules and regulations in effect at the time of mailing.

Permit imprint (G-11 mailing indicia) may be used for International Mail providing the mailing consist of at least 200 identical pieces. Permit imprint may not be used if less than 200 identical pieces. Instead, the mail must be metered and any permit imprint must be covered/concealed by a meter strip. All meter supplies must be borne by the contractor.

If the mailing meets the qualifications for International Priority Airmail (IPA), it should be processed through IPA in accordance with postal rules and regulations in effect at the time of mailing.

Contractor must prepare mail pieces in accordance with the shape-based requirements of First–Class Mail International service listed in the USPS International Mail Manual (IMM) and the additional requirements for IPA as specified in the most recent IMM. The contractor is required to sort the mail to achieve the maximum postage discounts available with the IPA program. To maximize postage savings, the contractor shall sort to the IPA Rate Group 1 through 15. Due to heightened security, many foreign postal administrations require complete sender and addressee information in roman letters and Arabic numerals on postal items.

The complete address of the sender, including ZIP Code and country of origin, should be shown in the upper left corner of the address side of the envelope, package, or card. International Mail return addresses must show as the last line of the address “UNITED STATES OF AMERICA” or “USA”, all in capital letters.

All International Mail must be endorsed “AIRMAIL/PAR AVION” as described in the “USPS IMM”. (The contractor may use a rubber stamp to meet these requirements.) *International Mail cannot contain a presort endorsement.*

**NOTE:** The contractor is cautioned that files listed will contain mail addressed to United States territories and possessions (American Samoa, Federated States of Micronesia, Guam, Marshall Islands, Northern Mariana Islands, Palau, Puerto Rico, Virgin Islands, Wake Island, and Military Overseas Addresses (APO/FPO mail). This mail is Domestic Mail, NOT International Mail and should be included in the discount sorting above.

**MAILING DOCUMENTATION:**

The contractor shall provide SSA with complete copies of all documents, including GPO's Form 712 (Certificate of Conformance), used by USPS to verify and accept the mail (e.g., computer records of presort ZIP+4, barcode breakdown, press runs, etc.). The contractor shall place the number that is on top of the GPO Form 712 (the number that starts with "A") in the space provided on the USPS mailing statements. If no space is provided on the mailing statement, place the number in the upper right margin of the mailing statement.

**NOTE:** The contractor will use **Federal Agency Cost Code 276-00049** on all mailing documents.

The contractor shall provide the Form 712 copies via Email within 72 hours of being provided to USPS to: Paul.Campbell@ssa.gov. All copies must be legible and include both obverse and reverse side and should be addressed to Paul Campbell, 1361 Annex Building, 6401 Security Boulevard, Baltimore, MD 21235-640.
The contractor is to supply a daily report for each mailing showing the number of notices printed, folded, inserted, and delivered to the post office. These reports are to begin on the day of printing and continue daily until the end of the term of the contract. Report is to be e-mailed to Paul.Campbell@ssa.gov.

The contractor will be required to forward photocopies of all Application for Voucher Refund of Postage and Fees Postal form 3533 (to USPS for credit), Postage Meter Activity Report forms and all postage meter replenishment receipts (from the meter vendor) to SSA, Attn: Karen Hetherington, 1313 Annex Building, 6401 Security Boulevard, Baltimore, MD 21235-6401

Furnished material, proofs, and USPS validated copies of postal documentation must be delivered (via overnight carrier) to the SSA Division of Printing Management at the address stated under "SCHEDULE".

Upon termination of this contract, the contractor must return all Governments furnished materials (Manuscript copy, camera copy, PDF file or electronic media) for each envelope, pamphlet, leaflet, fact sheet and form to: SSA, Paul Campbell, OPAMS, 1361 Annex Building, 6401 Security Boulevard, Baltimore, MD 21235-6401.

All expenses incidental to returning this material, submitting proofs, and furnishing samples copies must be borne by the contractor.

MAILING / SHIPPING DOCUMENTATION:

Contractor must forward one copy of billing payment voucher form 1034 for each print order showing amount of billing invoice must be sent within 10 days of mailing date to: SSA, ATTN: Paul Campbell, 1361 Annex Building, 6401 Security Boulevard, Baltimore, MD 21235-6401. The original voucher will be sent to the Comptroller FMCE, U.S. Government Printing Office.

PAYMENTS ON PRINT ORDERS: billing invoices must be submitted by Fax or mail to the U.S. GPO for the processing of vouchers for payment. Billing and payment instructions can be accessed on our website by the following hyperlinks:


FAX the completed invoice to GPO utilizing the payment processing cover sheet. Access the following hyperlink for preparation instructions: http://winapps.access.gpo.gov/fms/vouchers/barcode/instructions.html

Facsimile transmission should only be used when no samples are required with your invoice, otherwise payment will be held up while the invoice is returned to you for the required sample(s).


NOTE: Do not mail your invoice to any other GPO Procurement Office as this will delay payment.

SCHEDULE: Adherence to this schedule must be maintained. Contractor must not start production of any job prior to receipt of the daily electronic task order.

In the event that it becomes necessary for the contractor to deviate from the specified mail out date or the quantity to be mailed, SSA must be notified immediately.

Furnished material and proofs must be picked up from and delivered to: SSA, Paul Campbell, OPAMS, 1361 Annex Building, 6401 Security Boulevard, Baltimore, MD 21235-6401.

Manuscript copy, camera copy, PDF file or electronic media for envelopes, pamphlets, leaflets, fact sheets, and forms will be provided at the post-award meeting or immediately following post award.

The first task order for actual production will be issued in May 2016.

For each option year exercised, the amount of time in the schedule will remain the same.
**PROOF SCHEDULE:**

Proofs will be required for the initial order and any time a copy change may be required during the term of the contract.

**Proofing for Initial Start-Up:** The contractor will submit proofs for all envelopes, publications (pamphlets/leaflets/fact sheets), and forms under this contract within ten (10) workdays after receipt of furnished materials. Furnished materials (if manuscript or camera is provided) must be returned with proofs.

The Government will approve, conditionally approve, or disapprove these proofs within five (5) workdays of the receipt thereof. The Contractor must submit revised proofs, if necessary, due to author’s alterations (AA’s), within five (5) workdays after receipt of furnished material. No additional time will be permitted due to contractor’s errors (PE’s). Revised proofs will be available for pickup within three (3) workdays. The first workday after receipt of proofs at SSA is day one (1) of the hold time.

**Proofing (other than initial start-up):** The contractor must submit proofs for all envelopes, publications (pamphlets/leaflets/fact sheets), and forms under this contract within five (5) workdays after receipt of furnished material. Furnished materials (if manuscript or camera is provided) must be returned with proofs.

The Government will approve, conditionally approve or disapprove these proofs within five (5) workdays of the receipt thereof. The Contractor must submit revised proofs, if necessary due to Authors Alterations (AA’s), within five (5) workdays after receipt of furnished materials. No additional time will be permitted due to Printer’s Errors (PE’s). Revised proofs will be available for pickup within three (3) workdays. The first workday after receipt of proofs at SSA is day one (1) of the hold time.

**TEST SCHEDULES:**

Prior to receiving transmission of live production data files, the contractor will be required to perform the following tests: (The Transmission Test will begin after the Government is notified of the availability of the system.)

1.) **Transmission Test:** The contractor will be required to receive 204,000 notices (consisting of multiple pages) within one (1) workday. The contractor will be required to perform a Record Count Verification within one (1) workday after the complete transmission of the test file. The contractor will be required to copy the files to their own system and provide the exact file counts received (broken down by dataset name) via email to Paul.Campbell@ssa.gov before proceeding with any other processing. SSA will immediately verify the counts match and notify the contractor. When the Record Count Verification has been successfully completed, the contractor will be required to provide SSA 10 test samples from each file transmitted, within two (2) workdays.

2) **Pre-Production Validation Test:** Within five (5) workdays after Government approval of test samples and prior to the Pre-Production Press and Mail Run test, the contractor is required to perform a Pre-Production Validation Test. The contractor must furnish SSA a total of 425 printed samples of the notices (25 sample notices from each of the 17 mailers) from the test files furnished shortly after the post-award conference. The Government will approve, conditionally approve or disapprove the samples from the Pre-Production Validation Test within five (5) workdays of receipt thereof.

3) **Pre-Production Press and Mail Run Test:** The Contractor will be required to perform a 12-hour press and mail run test on their equipment and using their personnel, within five (5) workdays after Government approval of validation test samples and after the contractor receives the materials necessary to perform the test. The contractor will be required to print and prepare for mailing 34,949 notices. The mailers will be produced in accordance with all contract specifications and USPS regulations.

4) **Programming a New Notice or Notice Change/Signature Validation Test/New and Existing Notice Files Validation Test:** When required, the Government will furnish and transmit test files to be used when performing a Systems Change Validation Test. This test is required whenever SSA initiates a systems/programming change. When required, the contractor will furnish up to 100 printed samples (no envelopes or enclosures). The Government will approve, conditionally approve or disapprove the samples within seven (7) workdays of receipt thereof.

**NOTE:** Contractor must notify GPO of the date and time the Pre-Production Press And Mail-Run Test will be performed. In order for proper arrangements to be made, notification must be given at least three (3) workdays prior to all tests.
The contractor will be required to have all material necessary to perform these tests. Government representatives will witness all phases of the Preproduction Press and Mail Run Test. The contractor must produce a sufficient amount of notices that will prove to the Government representatives the contractor can satisfactorily complete the requirements of this contract during live production.

**NOTE:** Failure of the contractor to perform any of the above tests satisfactorily may be cause for default. The Government reserves the right to waive the requirements of these tests. The contractor will be notified at the Post-award Conference if any test(s) will be waived.

**PRODUCTION SCHEDULE:**

Adherence to this schedule must be maintained. Contractor must not start production of any job prior to receipt of the daily electronic task order and verification of counts from same. **NOTE:** Contractor must not proceed with processing a transmission until counts are verified against the task order. If a discrepancy is found, the contractor must call SSA’s Scheduling Helpline immediately at 866-718-6410.

If the contractor does not receive an electronic task order they must immediately notify SSA by Email at Paul.Campbell@ssa.gov and Tina Johnson at Tina.Johnson@ssa.gov or they may call Paul Campbell’s Video Relay Phone at 410-670-4588.

Workday – The term “workday” is defined as Monday through Friday* each week, excluding the days on which Federal Government holidays are observed. Also excluded are those days on which the GPO is not open for the transaction of business, such days of national mourning, hazardous weather, etc. Federal Government Holidays are as follows: New Year’s Day, Martin Luther King’s Birthday, President’s Day, Memorial Day, Independence Day, Labor Day, Columbus Day, Veterans Day, Thanksgiving Day, and Christmas Day.

*NOTE: The contractor’s FTMS software must be operational for the receipt of data files 24 hours a day, seven (7) days a week, unless otherwise specified by the Government. (See “FILE TRANSFER MANAGEMENT SYSTEM (FTMS) REQUIREMENTS” for additional information).

Live production files can be transmitted on a daily basis Monday through Saturday, except for Federal holidays in which case the data will be transmitted on the next day (i.e., when a Federal holiday falls on a Friday, production files will be transmitted on Saturday).

**NOTE:** Contractor must not proceed with processing a transmission until counts are verified against the task order. If a discrepancy is found the contractor must call SSA’s Helpline immediately at 410-966-5469.

**DELIVERY SCHEDULE:**

Mailer 1 (SEADJUST), Mailer 4 (ICOR), Mailer 5 (IRES), Mailer 7 (PUPS), and Mailers 9-17 (Aurora) Notices:
Complete production and mailing must be made on this notice within 2 workdays after receipt of each complete transmission; e.g., transmissions received on Monday must be mailed by close of business Wednesday, transmissions received on Saturday, must be mailed by close of business Tuesday.

Mailer 2 (RECON), Mailer 3 (RESUB PAPER), Mailer 6 (RESUB ELECTRONIC), and Mailer 8 (MES) Notices:
Complete production and mailing must be made on these notices within 5 workdays after receipt of each complete transmission; e.g., transmissions received on Monday must be mailed by the close of business the following Monday, transmissions received on Saturday must be mailed by the close of business Friday.

**SPECIAL MAILING INSTRUCTIONS NOTE:**

Earnings MOD and MES Notices (Mailers 1-8): All mailers must be released into the mail stream regardless of any addressing problems.

Aurora Notices (Mailers 9-17): The contractor is required to notify SSA if an addressing problem (no address or incomplete address information) is found. Due to notice content, the problem notice must be faxed the same day it is detected. SSA will provide the contractor with the necessary action to be taken (i.e. destroy or mail).
DAILY MAILERS EXCEEDING ESTIMATED QUANTITIES:
The total number of mailers has been estimated for each frequency requirement (Daily, Weekly, Monthly, and Quarterly). If the total for each frequency exceeds 25%, the Contractor will receive a “Premium Payment” as offered in the “Schedule of Prices”. No additional time will be allowed in the performance of this additional quantity.

NOTICE / PAMPHLET / LEAFLET / FACT SHEET / FORM SAMPLE QUANTITY REQUIREMENTS:

- Deliver f.o.b. destination with the first order and whenever SSA makes a significant change to the language, format, or appearance of a notice, 30 complete production samples of each type of notice, inserted into mail-out envelopes but NOT sealed. Samples shall be printed and constructed in accordance with these specifications. Deliver samples to SSA, Paul Campbell, OPAMS, 1361 Annex Building, 6401 Security Boulevard, Baltimore, MD 21235-6401.

- Deliver f.o.b. destination with the initial order and subsequent orders, five (5) production samples of each pamphlet, leaflet, fact sheet, and form to SSA, Paul Campbell, OPAMS, 1361 Annex Building, 6401 Security Boulevard, Baltimore, MD 21235-6401.

- Deliver f.o.b. destination with the initial order and subsequent orders, five (5) production samples of each envelope to Kevin Jennings, Division of Mail and Postage Policy, 1309 Annex Building, 6401 Security Boulevard, Baltimore, MD 21235-6401 and 5 production samples to SSA, Paul Campbell, OPAMS, 1361 Annex Building, 6401 Security Boulevard, Baltimore, MD 21235-6401.

PRODUCTION AND PRESS SHEET INSPECTIONS:
The contractor must notify the U.S. GPO of the date and time the Production OR Press Sheet Inspection can be performed. In order for proper arrangements to be made, notification must be given at least 72 hours prior to the inspection for orders placed on the regular schedule, and 24 hours prior to the inspection for orders placed on the accelerated schedule.

Notify the U.S. Government Printing Office, Quality Control for Procured Printing, Washington, DC 20401 at (202) 512-0542. Telephone calls will only be accepted between the hours of 8:00 a.m. and 2:00 p.m., prevailing Eastern Time, Monday through Friday.

NOTE: See contract clauses, paragraph 14(e) (1), Inspections and Tests in GPO Contract Terms (GPO Publication 310.2, effective December 1, 1987 (Rev. 6-01)). When supplies are not ready at the time specified by the contractor for inspection, the Contracting Officer may charge to the contractor the additional cost of the inspection.

NOTE: If the backup facility is used for the production of these notices, the Government will require a press sheet inspection. Prior to production, notification must be given at least 72 hours in advance of production start-up.

Unscheduled material such as shipping documents, receipts or instructions, delivery lists, and labels will be furnished with the order or shortly thereafter. In the event such information is not received in due time, the contractor will not be relieved of any responsibility in meeting the shipping schedule because of failure to request such information.

For compliance reporting purposes, contractors are to report information regarding each order with date of shipment or delivery, as applicable, in accordance with the contract requirements by contacting the Shared Support Services Compliance Section via email at compliance@gpo.gov, via telephone at (202) 512-0520, or via facsimile at (202) 512-1364. Personnel receiving the email, call, or facsimile will be unable to respond to questions of a technical nature or to transfer any inquiries.
SECTION 3 - DETERMINATION OF AWARD

The Government will determine the lowest bid by applying the prices offered in the “Schedule of Prices” to the following units of production which are the estimated requirements to produce the first year’s production under this contract. These units do not constitute, nor are they to be construed as, a guarantee of the volume of work which may be ordered under this contract for a like period of time.

**PREMIUM PAYMENTS**: Premium payments will be authorized when the number of mailers within one single transmission exceeds the maximum estimated total daily mailers by up to a maximum of 25%, for all mailers combined (Earnings MOD, MES, and AURORA).

Contractor will be authorized to apply the percentage increase, offered in the "Schedule of Prices" (Item VII) to the price(s) offered for Item II. "PRINTING/IMAGING and BINDING": line item (b), and Item IV. "INSERTING and MAILING" lines (a) through (e).

Failure of the contractor to deliver work at the time specified will result in disallowance of premium payments that were anticipated and the contractor will not list such items on their voucher.

The following item designations correspond to those listed in the “Schedule of Prices”.

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>I.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a)</td>
<td>41</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(b)</td>
<td>216</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(c)</td>
<td>20</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(d)</td>
<td>10</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(e)</td>
<td>10</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<p>| | | | | | | | | | | | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>II.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a)</td>
<td>256</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(b)</td>
<td>107,874</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(c)</td>
<td>7,530</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(d)</td>
<td>24,640</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(e)</td>
<td>5,720</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(f)</td>
<td>322</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(g)</td>
<td>2,446</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(h)</td>
<td>4,448</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(i)</td>
<td>56,088</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(j)</td>
<td>158</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(k)</td>
<td>124</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(l)</td>
<td>248</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(m)</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(n)</td>
<td>410</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(o)</td>
<td>270</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(p)</td>
<td>2,148</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(q)</td>
<td>194</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(r)</td>
<td>30</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(s)</td>
<td>400</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(t)</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(u)</td>
<td>10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(v)</td>
<td>12</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(w)</td>
<td>2,610</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(x)</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### III

<table>
<thead>
<tr>
<th></th>
<th>(1)</th>
<th>(2)</th>
<th>(3)</th>
<th>(4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a)</td>
<td>XXX</td>
<td>53,936</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>(b)</td>
<td>XXX</td>
<td>7,530</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>(c)</td>
<td>XXX</td>
<td>XXX</td>
<td>24,640</td>
<td>XXX</td>
</tr>
<tr>
<td>(d)</td>
<td>XXX</td>
<td>2,446</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>(e)</td>
<td>XXX</td>
<td>6,042</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>(f)</td>
<td>30,268</td>
<td>568</td>
<td>124</td>
<td>248</td>
</tr>
<tr>
<td>(g)</td>
<td>270</td>
<td>XXX</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>(h)</td>
<td>XXX</td>
<td>4,988</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>(i)</td>
<td>XXX</td>
<td>2</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>(j)</td>
<td>XXX</td>
<td>10</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>(k)</td>
<td>XXX</td>
<td>20</td>
<td>XXX</td>
<td>XXX</td>
</tr>
<tr>
<td>(l)</td>
<td>XXX</td>
<td>10</td>
<td>XXX</td>
<td>XXX</td>
</tr>
</tbody>
</table>

### IV

<table>
<thead>
<tr>
<th></th>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
<th>(e)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a)</td>
<td>5,474</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(b)</td>
<td>560</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(c)</td>
<td>1,484</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(d)</td>
<td>14</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(e)</td>
<td>24,640</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### V

<table>
<thead>
<tr>
<th></th>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a)</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(b)</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(c)</td>
<td>1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### VI

| (a) | 7     |

### VIII

| (a) | 34    |
SECTION 4 - SCHEDULE OF PRICES

Bids offered are f.o.b. destination to Baltimore, Maryland and f.o.b. contractor's city for all mailing.

Bidder must make an entry in each of the spaces provided. Bids submitted with any obliteration, revision, or alteration of the order and manner of submitting bids may be declared nonresponsive.

An entry of NC (No Charge) shall be entered if bidder intends to furnish individual items at no charge to the Government.

Bids submitted with NB (No Bid) or blank spaces for an item may be declared nonresponsive.

The Contracting Officer reserves the right to reject any offer that contains prices for individual items of production (whether or not such items are included in the Determination of Award) that are inconsistent or unrealistic in regard to other prices in the same offer or to GPO prices for the same operation if such action would be in the best interest of the Government.

Saddle-stitched booklets: A charge will be allowed for each page whether printed or blank.

Fractional parts of per 100 will be prorated at the per 100 rate. Cost of all required paper must be charged under Item III. "PAPER".

I. COMPOSITION: Before entering prices for composition, each bidder is cautioned to refer to all applicable paragraphs under "SECTION 2.- SPECIFICATIONS", pertaining to "COMPOSITION" and "PROOFS". The bidder shall take into consideration all factors commonly charged under trade practices. The prices offered must be all-inclusive, and must include the cost of all materials, operations, and proofs in accordance with the terms of these specifications. Claims for additional allowances under "commonly accepted trade practices" will not be considered.

NOTE: A charge will be allowed for each 8-1/2 x 11” page (or up to 93.5 sq. in with any fractional remainder being counted as a whole unit)

(a) Envelopes............................................................. per envelope ........................................... $ ___________
(b) Pamphlets, Leaflets, Fact Sheets, Forms ............. per 8-1/2 x 11” page ............................... $ ___________
(c) Digital Content Proofs
    (Revised for AA’s only) ...................................... per 8-1/2 x 11” page ............................... $ ___________
(d) Adobe Acrobat PDF soft proof
    (At the Government’s option) ................................................... per file ............................... $ ___________
(e) Digital one-piece composite
    laminated half-tone proofs
    (At the Government’s option) ...................... per 8-1/2 x 11” page ............................... $ ___________

II. PRINTING/IMAGING, BINDING AND CONSTRUCTION: Prices offered shall be all-inclusive for printing and binding as required, and shall include the cost of all required materials (except paper) and operations necessary for the complete production of the product listed in accordance with these specifications. Cost of all required paper must be charged under Item III. "PAPER".

(a) *Daily make-ready / setup charge .......................................................... $ ___________

*Contractor will be allowed only one (1) makeready/setup charge per day. This combined charge shall include all materials and operations necessary to makeready and/or setup the contractor's equipment for the 22 mailers run each day (Earnings MOD, MES, and AURORA). Invoices submitted with more than one makeready/setup charge per day will be disallowed.

(Initials)
(b) Notices (printing/imaging per page) ................. per 100 pages.......................... $ __________

c) Mail-out envelope 4-1/8 x 9-1/2" .................. per 100 envelopes......................... $ __________

d) Mail-out envelope 6-1/8 x 9-1/2" .................. per 100 envelopes......................... $ __________

e) CRM Return envelope ................................ per 100 envelopes......................... $ __________

(f) CMS CRM refund envelope ........................... per 100 envelopes......................... $ __________

g) BRM refund envelope .................................. per 100 envelopes......................... $ __________

(h) Saddle-stitched pamphlets: 2 versions
   Flat size: 7 x 8"; Folded size: 3-1/2 x 8"
   05-10095; 05-10137
   Prints in 2 PMS Colors
   Price offered includes binding .................. per 100 pages.......................... $ __________

(i) Saddle-stitched pamphlets: 3 versions
   Flat size: 10-1/2 x 8; Finished size: 5-1/4 x 8"
   05-10153; 05-10076; 05-10077
   Prints in 2 PMS Colors
   Price offered includes binding .................. per 100 pages.......................... $ __________

(j) Leaflet: 1 version
   Flat size: 10-1/2 x 8"; Folded size: 5-1/4 x 8"
   05-10018
   Prints in 2 PMS colors
   Price offered includes folding .................. per 100 complete leaflets............... $ __________

(k) Leaflets: 2 versions
   Flat size: 14 x 8"; Folded size: 3-1/2 x 8"
   05-10072; 05-10958
   Prints in 2 PMS colors
   Price offered includes folding .................. per 100 complete leaflets............... $ __________

(l) Leaflets: 3 versions
   Flat size: 17-1/2 x 8"; Folded size: 3-1/2 x 8"
   16-002; 05-10069; 70-10281
   Prints in 2 PMS colors
   Price offered includes folding .................. per 100 complete leaflets............... $ __________

(m) Leaflets: 1 version
   Flat size: 21 x 8"; Folded size: 3-1/2 x 8"
   70-10283
   Prints in 2 PMS colors
   Price offered includes folding .................. per 100 complete leaflets............... $ __________

(n) Fact Sheets: 3 versions
   Flat size: 8-1/2 x 11"; Folded size: 8-1/2 x 5-1/2"
   05-10007; 05-10045; 05-10075
   Prints in 2 PMS colors
   Price offered includes folding .................. per 100 complete fact sheets.......... $ __________
(o) Form CMS-2690
   Flat size: 8-1/2 x 3-1/2"
   Prints in black – face and back
   Price includes trimming 4 sides .................. per 100 complete forms ...................................... $ ___________

(p) Form SSA-3105
   Flat size: 10-1/2 x 8” Folded size: 3-1/2 x 8”
   Prints in black – face and back
   Price includes perforing and folding ............... per 100 complete forms ................................... $ ___________

(q) Form SSA-L4360-SP
   Flat size: 8-1/2 x 11”; Folded size: 8-1/2 x 5-1/2”
   Prints in black – face only
   Price includes folding .............................. per 100 complete forms ................................... $ ________ ___

(r) Form SSA-3885; Form SSA-4111
   Flat size: 8-1/2 x 11”; Folded size: 8-1/2 x 5-1/2”
   Prints in black – face and back
   Price includes folding .............................. per 100 complete forms ................................... $ ________ ___

(s) Form SSA-150
   Flat size: 8-1/2 x 11” Folded size: 8-1/2 x 5-1/2”
   Prints in black – face and back
   Price includes drilling and folding .............. per 100 complete forms ...................................... $ ___________

(t) Form SSA-561-U2
   Flat size: 8-1/2 x 11” Folded size: 8-1/2 x 5-1/2”
   Prints in black – face and back
   Price includes binding ............................. per 100 complete snap-out sets ............................... $ ___________

(u) Form SSA-1560-U4
   Flat size: 8-1/2 x 11-5/8” (with 5/8” stub)
   Prints in black and red – face only
   Price includes binding ............................. per 100 complete snap-out sets ............................... $ ___________

(v) Form SF-180; Form SSA-1588; Form SSA-4588-OP1, Form SSA-4588-OP2, Form SSA-4588-OP3, Form SSA-4588-OP4, Form SSA-4588-OP5, and Form SSA-4588-OP6
   Flat size: 17 x 11”; Folded size: 8-1/2 x 5-1/2”
   Prints in black – face and back
   Price includes folding .............................. per 100 complete forms ...................................... $ ___________

(w) Form SSA-21; Form SSA-1724
   Flat size: 17 x 11” Folded size: 8-1/2 x 5-1/2”
   Prints in black – face and back
   Price includes drilling and folding .............. per 100 complete forms ...................................... $ ___________

(x) Form SSA-1372-BK
   Flat size: 17 x 11”; Pasted size: 8-1/2 x 11” pages
   Then re-folded to finished size: 8-1/2 x 5-1/2”
   8-page paste on fold
   Prints in black – face and back
   Price includes paste binding ..................... per 100 complete booklets ................................... $ ___________

(Initials)
III. PAPER: Payment for all paper supplied by the contractor under the terms of these specifications, as ordered on the individual task order, will be based on the net number of leaves furnished for the product(s) ordered in the applicable "Trim Size" group. The cost of any paper required for make-ready or running spoilage must be included in the prices offered.

Computation of the net number of leaves will be based on the following:

<table>
<thead>
<tr>
<th>Product</th>
<th>Format A</th>
<th>Format B</th>
<th>Format C</th>
<th>Format D</th>
</tr>
</thead>
<tbody>
<tr>
<td>Notices: 8-1/2 x 11&quot;</td>
<td>A charge will be allowed in Format B for each page size leaf</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Envelopes: 4-1/8 x 9-1/2&quot;</td>
<td>One page size leaf in Format B will be allowed for each envelope.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Envelopes: 6-1/8 x 9-1/2&quot;</td>
<td>One page size leaf in Format C will be allowed for each envelope.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Envelopes: 3-7/8 x 8-7/8&quot;</td>
<td>One page size leaf in Format B will be allowed for each envelope.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pamphlets: 3-1/2 x 8&quot;</td>
<td>A charge will be allowed in Format A for each page size leaf (based on page size)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pamphlets: 5-1/4 x 8&quot;</td>
<td>A charge will be allowed in Format A for each page size leaf</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Leaflets: 10-1/2 x 8&quot;</td>
<td>One page size leaf in Format B will be allowed for each leaflet (based on flat size)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Leaflets: 14 x 8&quot;</td>
<td>One page size leaf in Format C will be allowed for each leaflet.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Leaflets: 17-1/2 x 8&quot;</td>
<td>One page size leaf in Format D will be allowed for each leaflet.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Leaflets: 21 x 8&quot;</td>
<td>One page size leaf in Format D will be allowed for each leaflet.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pamphlets: 8-1/2 x 11&quot;</td>
<td>One page size leaf in Format B will be allowed for each fact sheet.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Form CMS-2690: 8-1/2 x 3-1/2&quot;</td>
<td>One page-size leaf in Format A will be allowed for each form.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Form SSA-3105: 10-1/2 x 8&quot;</td>
<td>One page-size leaf in Format B will be allowed for each form.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Form SSA-L4360-SP: 8-1/2 x 11&quot;</td>
<td>One page-size leaf in Format B will be allowed for each form.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Form SSA-3885: 8-1/2 x 11&quot;</td>
<td>One page-size leaf in Format B will be allowed for each form.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Form SSA-4111: 8-1/2 x 11&quot;</td>
<td>One page-size leaf in Format B will be allowed for each form.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Form SSA-150: 8-1/2 x 11&quot;</td>
<td>One page-size leaf in Format B will be allowed for each form.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Form SSA-561-U2: 8-1/2 x 11&quot;</td>
<td>A charge will be allowed in Format B for each page size leaf.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Form SSA-1560-U4: 8-1/2 x 11-5/8&quot;</td>
<td>A charge will be allowed in Format C for each page size leaf.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Form SF-180: 17 x 11&quot;</td>
<td>A charge will be allowed in Format B for each page size leaf.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Form SF-1588: 17 x 11&quot;</td>
<td>A charge will be allowed in Format B for each page size leaf.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Form SSA-4588: 17 x 11&quot;</td>
<td>A charge will be allowed in Format B for each page size leaf.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Form SSA-21: 17 x 11&quot;</td>
<td>A charge will be allowed in Format B for each page size leaf.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Form SSA-1724: 17 x 11&quot;</td>
<td>A charge will be allowed in Format B for each page size leaf.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Form SSA-1372-BK: 17 x 11&quot;</td>
<td>A charge will be allowed in Format B for each page size leaf.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Per 100 Leaves

<table>
<thead>
<tr>
<th>Format A</th>
<th>Format B</th>
<th>Format C</th>
<th>Format D</th>
</tr>
</thead>
<tbody>
<tr>
<td>5-1/4 x 8&quot; (1)</td>
<td>8-1/2 x 11&quot; (2)</td>
<td>14 x 8&quot; (3)</td>
<td>21 x 8&quot; (4)</td>
</tr>
</tbody>
</table>

(a) Notices

White Offset Book 50 lb. ......................... N/A $ ________ N/A N/A

(Initials)
### Per 100 Leaves

<table>
<thead>
<tr>
<th></th>
<th>Format A</th>
<th>Format B</th>
<th>Format C</th>
<th>Format D</th>
</tr>
</thead>
<tbody>
<tr>
<td>5-1/4 x 8&quot;</td>
<td>(1)</td>
<td>(2)</td>
<td>(3)</td>
<td>(4)</td>
</tr>
<tr>
<td>(b) Mail-out Envelope 4-1/8 x 9-1/2&quot;</td>
<td>White Wove 24 lb. or White Offset Book 60 lb.</td>
<td>N/A</td>
<td>$ ________</td>
<td>N/A</td>
</tr>
<tr>
<td>(c) Mail-out Envelope 6-1/8 x 9-1/2&quot;</td>
<td>White Kraft 24 lb.</td>
<td>N/A</td>
<td>N/A</td>
<td>$ ________</td>
</tr>
<tr>
<td>(d) CRM Return Envelope CMS CRM Refund Envelope</td>
<td>White Wove 20 lb.</td>
<td>N/A</td>
<td>$ ________</td>
<td>N/A</td>
</tr>
<tr>
<td>(e) BRM Refund Envelope Colored Wove 20 lb.</td>
<td>N/A</td>
<td>$ ________</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>(f) All Pamphlets, Leaflets and Fact sheets</td>
<td>White Offset Book 60 lb.</td>
<td>$ ________</td>
<td>$ ________</td>
<td>$ ________</td>
</tr>
<tr>
<td>(g) Form CMS-2690: Yellow Index 90 lb.</td>
<td>N/A</td>
<td>$ ________</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>(h) Form SSA-3105; Form SSA-L4360-SP; Form SSA-3885; Form SSA-4111; Form SSA-150; Form SF-180; Form SF-1588; Form SSA-4588 (OP1 thru OP6); Form SSA-21; Form SSA-1724; and Form SSA-1372-BK</td>
<td>White Writing 20 lb. or White Offset Book 50 lb.</td>
<td>N/A</td>
<td>$ ________</td>
<td>N/A</td>
</tr>
<tr>
<td>(i) Form SSA-561-U2 (Parts 1 &amp; 2): White Chemical Transfer CB, CF 13-15 lbs.</td>
<td>N/A</td>
<td>$ ________</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>(j) Form SSA-1560-U4 (Part 1): Chemical Transfer Bond White NCR CB 15 lbs.</td>
<td>N/A</td>
<td>N/A</td>
<td>$ ________</td>
<td>N/A</td>
</tr>
<tr>
<td>(k) Form SSA-1560-U4 (Parts 2 and 3): Chemical Transfer Bond White NCR CFB 17 lbs.</td>
<td>N/A</td>
<td>N/A</td>
<td>$ ________</td>
<td>N/A</td>
</tr>
<tr>
<td>(l) Form SSA-1560-U4 (Part 4): Chemical Transfer Bond White NCR CF 15 lbs.</td>
<td>N/A</td>
<td>N/A</td>
<td>$ ________</td>
<td>N/A</td>
</tr>
</tbody>
</table>

### IV. INSERTING AND MAILING

Prices offered must include the cost of all required materials and operations necessary for the mailing of the notice including cost of collating notice (single or multiple leaves) in proper sequence and folding to required size in accordance with these specifications, insertion of notice(s), and appropriate inserts as required (i.e., form(s), pamphlet(s), leaflet(s) and refund/return envelope(s)), into mail-out envelope and mailing in accordance with these specifications.

(Initials)
**Earnings MOD**: Mailers 1 through 7. Mailers will consist of a notice with 1 to 7 printed pages and may generate any combination of component(s) listed.

(a) Mailer 1: OLBG.BTI.vendor.SEAAFP.M11*****.RYYMMDD (SEADJUST)
Mailer 3: OLBG.BTI.vendor.RSBAFP.M31*****.RYYMMDD (RESUB PAPER)
Mailer 5: OLBG.BTI.vendor.IREAHP.M51*****.RYYMMDD (IRES)
Mailer 6: OLBG.BTI.vendor.RSBAFP.M61*****.RYYMMDD (RESUB ELECTRONIC)
Mailer 7: OLBG.BTI.vendor.PRIAHP.M71*****.RYYMMDD (PUPS-PRIS)

Personalized Notice, and
Mail-out envelope (4-1/8 x 9-1/2") per 100 complete mailers $ ___________

(b) Mailer 2: OLBG.BTI.vendor.E15AFP.M21*****.RYYMMDD (RECON)

Personalized Notice, CRM Return Envelope,
SSA Pub. No. 16-002, and
Mail-out envelope (4-1/8 x 9-1/2") per 100 complete mailers $ ___________

(c) Mailer 4: OLBG.BTI.vendor.EMSAFP.M41*****.RYYMMDD (ICOR)

Personalized Notice, Personalized Spanish Cover
Letter with English Notice,
Personalized Spanish Notice, and
Mail-out envelope (4-1/8 x 9-1/2") per 100 complete mailers $ ___________

**MES**: Mailer 8 will consist of a single leaf Notice and a mail-out envelope.

(d) Mailer 8: OLBG.BTI.vendor.MESAFP.M81*****.RYYMMDD

Personalized Notice, and
Mail-out envelope (4-1/8 x 9-1/2") per 100 complete mailers $ ___________

**AURORA**: Mailers 9 through 17. Mailers can consist of notices with 1 to 20 printed pages and any combination of components listed with mailer.

**NOTE**: Aurora notices contain approximately 20% manual insertions.

(e) Mailer 9: OLBG.BTI.vendor.CTPAFP.M9#*****.RYYMMDD (AJS-1)
Mailer 10: OLBG.BTI.vendor.CTPAFP.M0#*****.RYYMMDD (MCS)
Mailer 11: OLBG.BTI.vendor.CTPAFP.MA#*****.RYYMMDD (MADCAP)
Mailer 12: OLBG.BTI.vendor.CTPAFP.MB#*****.RYYMMDD (TATTER)
Mailer 13: OLBG.BTI.vendor.CTPAFP.MC#*****.RYYMMDD (REACT)
Mailer 14: OLBG.BTI.vendor.CTPAFP.MD#*****.RYYMMDD (T2R)
Mailer 15: OLBG.BTI.vendor.CTPAFP.ME#*****.RYYMMDD (MISC)
Mailer 16: OLBG.BTI.vendor.CTPAFP.MF#*****.RYYMMDD (IRMAA)
Mailer 17: OLBG.BTI.vendor.CTPAFP.MG#*****.RYYMMDD (SNO)

Personalized English Notice, Green BRM Refund Envelope, Goldenrod BRM Reply Envelope, Green CRM Return Envelope, White CRM Return Envelope, White CMS CRN Refund Envelope, Publications: 05-10076, 05-10077, 05-10095, 05-10153, 05-10137, 05-10018, 05-10072, 05-10958, 05-10069, 70-10281, 70-10283, 05-10007, 05-10045, 05-10075, Form CMS-2690, Form SSA-3105, Form SSA-4360-SP, Form SSA-3885, Form SSA-4111, Form SSA-150, Form SSA-561-U2, Form SSA-1560-U4, Form SF-180, Form SF-1588, Form SSA-4588 (OP1 – OP6), Form SSA-21, Form SSA-1724, Form SSA-1372-BK,
Mail-out envelope (6-1/8 x 9-1/2") - with or without "IR designator
Per 100 complete mailers $ ___________

(Initials)
V. PREPRODUCTION TESTS: Price offered must include all costs incurred in performing the three (3) tests (Preproduction Press and Mail Run Test, Transmission Test and Validation Test) as specified in these specifications. These costs shall cover but are not limited to: machine time, personnel, all required materials, transmissions, electronic pre-press, plates, paper, printing, imaging, collating, inserting, mail preparation, and any other operations necessary to produce the required quantities of the product in the time specified and in accordance with specifications.

(a) Pre-production Validation Test OR System Change Validation Test........................................ $ ___________
(b) Transmission Test................................................................................................................. $ ___________
(c) Preproduction Press and Mail Run Test ............................................................................... $ ___________

VI. PROGRAMMING A NEW NOTICE OR NOTICE CHANGE (includes notice signature changes)/NEW AND EXISTING NOTICE FILES VALIDATION TEST: Price offered must include all costs incurred during the term of the contract.

(a) Programming a New Notice or Notice Change (per mailer) ................................................ $ ___________

NOTE: Cost of printing/imaging, paper, binding, inserting, envelopes (if required) will be included in the appropriate print order and will be charged accordingly under II., III. and IV above.

VII. PREMIUM PAYMENTS WHEN DAILY MAILERS EXCEED ESTIMATED MAXIMUM QUANTITIES:

Premium payments will be authorized when the number of mailers within one frequency (Daily, Weekly, Monthly, and Quarterly) exceeds by 25% of the maximum estimated total daily mailers for that frequency requirement. Premium payments will apply to all costs Item II. "PRINTING/IMAGING and BINDING": line item (b), and Item IV. "INSERTING and MAILING" line items (a) through (e).

(a) Percentage increase ........................................................................................................... __________ %

VIII. NOTICE DESTRUCTION FEE

(a) Per 100 notices destroyed...................................................................................................... $__________

INSTRUCTIONS FOR BID SUBMISSION: Fill out "Section 4.- Schedule of Prices," initialing or signing each page in the space(s) provided. Submit two copies (original and one exact duplicate) of the "SCHEDULE OF PRICES" with two copies of the GPO Form 910, "BID" form. Do not enter bid prices on GPO Form 910; prices entered in the "SCHEDULE OF PRICES" will prevail.

Bidder_______________________________________________________________________________________
____________________________________________________________________________________________
(City - State)

By__________________________________________________________________________________________
(Signature and title of person authorized to sign this bid)
____________________________________________________________________________________________
(Person to be contacted) (Telephone Number)
CONTRACTOR PERSONNEL SECURITY CERTIFICATION

Purpose: This form is used for contractor personnel to certify that they understand SSA's security and confidentiality requirements.

I understand the SSA security and confidentiality requirements and agree that:

1. I will follow all SSA rules of conduct and security policy/privacy rules/regulations.

2. I agree not to construct and maintain, for a period of time longer than required by the contract, any file containing SSA data unless explicitly agreed to by SSA in writing as part of the task documentation.

3. I agree to safeguard SSA information, whether electronic or hardcopy, in secured and locked containers during transportation.

4. I will use all computer software according to Federal copyright laws and licensing agreements.

5. I agree to keep confidential any third-party proprietary information which may be entrusted to me as part of the contract.

6. I will comply with systems security requirements contained in the SSA Systems Security Handbook.

7. I will not release or disclose any information subject to the Privacy Act of 1974, the Tax Return Act of 1976, SSA Regulation 1 and section 1106 of the Social Security Act to any unauthorized person.

8. I understand that disclosure of any information to parties not authorized by SSA may lead to civil or criminal prosecution under Federal law.

__________________________________________________________________________
Contractor Employee                                                   Date
__________________________________________________________________________
Contractor Employee                                                   Date
__________________________________________________________________________
Contractor Employee                                                   Date
__________________________________________________________________________
Contractor Employee                                                   Date

Form SSA-301 (2-98)
Questionnaire for Public Trust Positions

Follow instructions fully or we cannot process your form. Be sure to sign and date the certification statement on Page 7 and the release on Page 8. If you have any questions, call the office that gave you the form.

Purpose of this Form

The U.S. Government conducts background investigations and reinvestigations to establish that applicants or incumbents either employed by the Government or working for the Government under contract, are suitable for the job and/or eligible for a public trust or sensitive position. Information from this form is used primarily as the basis for this investigation. Complete this form only after a conditional offer of employment has been made.

Giving us the information we ask for is voluntary. However, we may not be able to complete your investigation, or complete it in a timely manner, if you don’t give us each item of information we request. This may affect your placement or employment prospects.

Authority to Request this Information

The U.S. Government is authorized to ask for this information under Executive Orders 10450 and 10577, sections 3301 and 3302 of title 5, U.S. Code; and parts 5, 731, 732, and 736 of Title 5, Code of Federal Regulations.

Your Social Security number is needed to keep records accurate, because other people may have the same name and birth date. Executive Order 9397 also asks Federal agencies to use this number to help identify individuals in agency records.

The Investigative Process

Background investigations are conducted using your responses on this form and on your Declaration for Federal Employment (OF 306) to develop information to show whether you are reliable, trustworthy, of good conduct and character, and loyal to the United States. The information that you provide on this form is confirmed during the investigation. Your current employer must be contacted as part of the investigation, even if you have previously indicated on applications or other forms that you do not want this.

In addition to the questions on this form, inquiry also is made about a person’s adherence to security requirements, honesty and integrity, vulnerability to exploitation or coercion, falsification, misrepresentation, and any other behavior, activities, or associations that tend to show the person is not reliable, trustworthy, or loyal.

Your Personal Interview

Some investigations will include an interview with you as a normal part of the investigative process. This provides you the opportunity to update, clarify, and explain information on your form more completely, which often helps to complete your investigation faster. It is important that the interview be conducted as soon as possible after you are contacted. Postponements will delay the processing of your investigation, and declining to be interviewed may result in your investigation being delayed or canceled.

You will be asked to bring identification with your picture on it, such as a valid State driver’s license, to the interview. There are other documents you may be asked to bring to verify your identity as well.

These include documentation of any legal name change, Social Security card, and/or birth certificate.

You may also be asked to bring documents about information you provided on the form or other matters requiring specific attention. These matters include alien registration, delinquent loans or taxes, bankruptcy, judgments, liens, or other financial obligations, agreements involving child custody or support, alimony or property settlements, arrests, convictions, probation, and/or parole.

Instructions for Completing this Form

1. Follow the instructions given to you by the person who gave you the form and any other clarifying instructions furnished by that person to assist you in completion of the form. Find out how many copies of the form you are to turn in. You must sign and date, in black ink, the original and each copy you submit.

2. Type or legibly print your answers in black ink (if your form is not legible, it will not be accepted). You may also be asked to submit your form in an approved electronic format.

3. All questions on this form must be answered. If no response is necessary or applicable, indicate this on the form (for example, enter "None" or "N/A"). If you find that you cannot report an exact date, approximate or estimate the date to the best of your ability and indicate this by marking "APPROX." or "EST."

4. Any changes that you make to this form after you sign it must be initialed and dated by you. Under certain limited circumstances, agencies may modify the form consistent with your intent.

5. You must use the State codes (abbreviations) listed on the back of this page when you fill out this form. Do not abbreviate the names of cities or foreign countries.

6. The 5-digit postal ZIP codes are needed to speed the processing of your investigation. The office that provided the form will assist you in completing the ZIP codes.

7. All telephone numbers must include area codes.

8. All dates provided on this form must be in Month/Day/Year or Month/Year format. Use numbers (1-12) to indicate months. For example, June 10, 1978, should be shown as 6/10/78.

9. Whenever "City (Country)" is shown in an address block, also provide in that block the name of the country when the address is outside the United States.

10. If you need additional space to list your residences or employments/self-employments/unemployments or education, you should use a continuation sheet, SF 86A. If additional space is needed to answer other items, use a blank piece of paper. Each blank piece of paper you use must contain your name and Social Security Number at the top of the page.
Final Determination on Your Eligibility

Final determination on your eligibility for a public trust or sensitive position and your being granted a security clearance is the responsibility of the Office of Personnel Management or the Federal agency that requested your investigation. You may be provided the opportunity personally to explain, refute, or clarify any information before a final decision is made.

Penalties for Inaccurate or False Statements

The U.S. Criminal Code (title 18, section 1001) provides that knowingly falsifying or concealing a material fact is a felony which may result in fines of up to $100,000, and/or 5 years imprisonment, or both. In addition, Federal agencies generally fire, do not grant a security clearance, or disqualify individuals who have materially and deliberately falsified these forms, and this remains a part of the permanent record for future placements. Because the position for which you are being considered is one of public trust or is sensitive, your truthfulness is a very important consideration in deciding your suitability for placement or retention in the position.

Your prospects of placement are better if you answer all questions truthfully and completely. You will have adequate opportunity to explain any information you give us on the form and to make your comments part of the record.

Disclosure of Information

The information you give us is for the purpose of investigating you for a position; we will protect it from unauthorized disclosure. The collection, maintenance, and disclosure of background investigative information is governed by the Privacy Act. The agency which requested the investigation and the agency which conducted the investigation have published notices in the Federal Register describing the system of records in which your records will be maintained. You may obtain copies of the relevant notices from the person who gave you this form. The information on this form, and information we collect during an investigation may be disclosed without your consent as permitted by the Privacy Act (5 USC 552a(b)) and as follows:

1. To the Department of Justice when: (a) the agency or any component thereof; or (b) any employee of the agency in his or her official capacity; or (c) any employee of the agency in his or her individual capacity where the Department of Justice has agreed to represent the employee; or (d) the United States Government, is a party to litigation or has interest in such litigation, and by careful review, the agency determines that the records are both relevant and necessary to the litigation and the use of such records by the Department of Justice is therefore deemed by the agency to be for a purpose that is compatible with the purpose for which the agency collected the records.

2. To a court or adjudicative body in a proceeding when: (a) the agency or any component thereof; or (b) any employee of the agency in his or her official capacity; or (c) any employee of the agency in his or her individual capacity where the Department of Justice has agreed to represent the employee; or (d) the United States Government is a party to litigation or has interest in such litigation, and by careful review, the agency determines that the records are both relevant and necessary to the litigation and the use of such records is therefore deemed by the agency to be for a purpose that is compatible with the purpose for which the agency collected the records.

3. Except as noted in Question 21, when a record on its face, or in conjunction with other records, indicates a violation of potential violation of law, whether civil, criminal, or regulatory in nature, and whether arising by general statute, particular program statute, regulation, rule, or order issued pursuant thereto, the relevant records may be disclosed to the appropriate Federal, foreign, State, local, tribal, or other public authority responsible for enforcing, investigating or prosecuting such violation or charged with enforcing or implementing the statute, rule, regulation, or order.

4. To any source or potential source from which information is requested in the course of an investigation concerning the hiring or retention of an employee or other personnel action, or the issuing or retention of a security clearance, contract, grant, license, or other benefit, to the extent necessary to identify the individual, inform the source of the nature and purpose of the investigation, and to identify the type of information requested.

5. To a Federal, State, local, foreign, tribal, or other public authority the fact that this system of records contains information relevant to the retention of an employee, or the retention of a security clearance, contract, license, grant, or other benefit. The other agency or licensing organization may then make a request supported by written consent of the individual for the entire record if it so chooses. No disclosure will be made unless the information has been determined to be sufficiently reliable to support a referral to another office within the agency or another Federal agency for criminal, civil, administrative, personnel, or regulatory action.

6. To contractors, grantees, experts, consultants, or volunteers when necessary to perform a function or service related to this record for which they have been engaged. Such recipients shall be required to comply with the Privacy Act of 1974, as amended.

7. To the news media or the general public, factual information the disclosure of which would be in the public interest and which would not constitute an unwarranted invasion of personal privacy.

8. To a Federal, State, or local agency, or other appropriate entities or individuals, or through established liaison channels to selected foreign governments, in order to enable an intelligence agency to carry out its responsibilities under the National Security Act of 1947 as amended, the CIA Act of 1949 as amended, Executive Order 12333 or any successor order, applicable national security directives, or classified implementing procedures approved by the Attorney General and promulgated pursuant to such statutes, orders or directives.

9. To a Member of Congress or to a Congressional staff member in response to an inquiry of the Congressional office made at the written request of the constituent about whom the record is maintained.

10. To the National Archives and Records Administration for records management inspections conducted under 44 USC 2904 and 2906.

11. To the Office of Management and Budget when necessary to the review of private relief legislation.

STATE CODES (ABBREVIATIONS)

Alabama AL Hawaii HI Massachusetts MA New Mexico NM South Dakota SD
Alaska AK Idaho ID Michigan MI New York NY Tennessee TN
Arizona AZ Illinois IL Minnesota MN North Carolina NC Texas TX
Arkansas AR Indiana IN Mississippi MS North Dakota ND Utah UT
California CA Iowa IA Missouri MO Ohio OH Vermont VT
Colorado CO Kansas KS Montana MT Oklahoma OK Virginia VA
Connecticut CT Kentucky KY Nebraska NE Oregon OR Washington WA
Delaware DE Louisiana LA Nevada NV Pennsylvania PA West Virginia WV
Florida FL Maine ME New Hampshire NH Rhode Island RI Wisconsin WI
Georgia GA Maryland MD New Jersey NJ South Carolina SC Wyoming WY
American Samoa AS District of Columbia DC Guam GU Northern Marianas CM Puerto Rico PR
Trust Territory TT Virgin Islands VI

PUBLIC BURDEN INFORMATION

Public burden reporting for this collection of information is estimated to average 60 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Reports and Forms Management Officer, U.S. Office of Personnel Management, 1900 E Street, N.W., Room CHP-500, Washington, D.C. 20415. Do not send your completed form to this address.
QUESTIONNAIRE FOR PUBLIC TRUST POSITIONS

<table>
<thead>
<tr>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
<th>F</th>
<th>G</th>
<th>H</th>
<th>I</th>
<th>J</th>
<th>K</th>
<th>L</th>
<th>M</th>
<th>N</th>
<th>O</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of Investigation</td>
<td>Extra Coverage</td>
<td>Sensitivity/ Risk Level</td>
<td>Compu. ADP</td>
<td>Nature of Action Code</td>
<td>Date of Action</td>
<td>Geographic Location</td>
<td>Position Code</td>
<td>Position Title</td>
<td>Location of Official Personnel Folder</td>
<td>Location of Security Folder</td>
<td>Requesting Official</td>
<td>Accounting Data and/or Agency Case Number</td>
<td>Signature</td>
<td>Telephone Number</td>
<td>Date</td>
</tr>
</tbody>
</table>

Persons completing this form should begin with the questions below.

1. FULL NAME: If you have only initials in your name, use them and state (IO). - If you are a "Jr.," "Sr.," "II," etc., enter this in the box after your middle name.

   Last Name | First Name | Middle Name | Jr., II, etc. | Month | Day | Year

2. PLACE OF BIRTH: Use the two letter code for the State.

   City | County | State | Country (if not in the United States)

3. SOCIAL SECURITY NUMBER

4. OTHER NAMES USED

   | #1 | #2 | #3 | #4 |
   | Name | Name | Name | Name |
   | Month/Year | Month/Year | Month/Year | Month/Year |
   | To | To | To | To |

5. OTHER IDENTIFYING INFORMATION

   | Height (feet and inches) | Weight (pounds) | Hair Color | Eye Color | Sex (Mark one box) |
   | Work (include Area Code and extension) | Home (include Area Code) |
   | Day | Night | Day | Night |

6. CITIZENSHIP

   I am a U.S. citizen or national by birth in the U.S. or U.S. territory/possession. Answer items b and d.

   I am a U.S. citizen, but I was NOT born in the U.S. Answer items b, c and d.

   I am not a U.S. citizen. Answer items b and e.

   Your Mother's Maiden Name

7. UNITED STATES CITIZENSHIP

   If you are a U.S. Citizen, but were not born in the U.S., provide information about one or more of the following proofs of your citizenship.

   Naturalization Certificate (Where were you naturalized?)

   Citizenship Certificate (Where was the certificate issued?)

   State Department Form 240 - Report of Birth Abroad of a Citizen of the United States

   Give the date the form was prepared and give an explanation if needed.

   U.S. Passport

   This may be either a current or previous U.S. Passport

   Country

8. DUAL CITIZENSHIP

   If you are (or were) a dual citizen of the United States and another country, provide the name of that country in the space to the right.

   Alien Registration Number

   Country(ies) of Citizenship

9. ALIEN

   If you are an alien, provide the following information:

   Place You Entered the United States:

   Country

   Month: Day: Year

   Alien Registration Number

   Country(ies) of Citizenship

Exception to SF85, SF85P, SF85P-S, SF86, and SF86A approved by GSA September, 1995.

Designed using Perform Pro, WHS/DIOR, Sep 95
Where You Have Lived

List the places where you have lived, beginning with the most recent (#1) and working back 7 years. All periods must be accounted for in your list. Be sure to indicate the actual physical location of your residence: do not use a post office box as an address, do not list a permanent address when you were actually living at a school address, etc. Be sure to specify your location as closely as possible: for example, do not list only your base or ship, list your barracks number or home port. You may omit temporary military duty locations under 90 days (list your permanent address instead), and you should use your APO/FPO address if you lived overseas.

For any address in the last 5 years, list a person who knew you at that address, and who preferably still lives in that area (do not list people for residences completely outside this 5-year period, and do not list your spouse, former spouses, or other relatives). Also for addresses in the last 5 years, if the address is "General Delivery," a Rural or Star Route, or may be difficult to locate, provide directions for locating the residence on an attached continuation sheet.

<table>
<thead>
<tr>
<th>#1</th>
<th>Month/Year</th>
<th>Month/Year To Present</th>
<th>Street Address</th>
<th>Apt. #</th>
<th>City (Country)</th>
<th>State</th>
<th>ZIP Code</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Name of Person Who Knows You</td>
<td>Street Address</td>
<td>Apt. #</td>
<td>City (Country)</td>
<td>State</td>
<td>ZIP Code</td>
<td>Telephone Number</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>#2</th>
<th>Month/Year</th>
<th>Month/Year To</th>
<th>Street Address</th>
<th>Apt. #</th>
<th>City (Country)</th>
<th>State</th>
<th>ZIP Code</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Name of Person Who Knew You</td>
<td>Street Address</td>
<td>Apt. #</td>
<td>City (Country)</td>
<td>State</td>
<td>ZIP Code</td>
<td>Telephone Number</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>#3</th>
<th>Month/Year</th>
<th>Month/Year To</th>
<th>Street Address</th>
<th>Apt. #</th>
<th>City (Country)</th>
<th>State</th>
<th>ZIP Code</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Name of Person Who Knew You</td>
<td>Street Address</td>
<td>Apt. #</td>
<td>City (Country)</td>
<td>State</td>
<td>ZIP Code</td>
<td>Telephone Number</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>#4</th>
<th>Month/Year</th>
<th>Month/Year To</th>
<th>Street Address</th>
<th>Apt. #</th>
<th>City (Country)</th>
<th>State</th>
<th>ZIP Code</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Name of Person Who Knew You</td>
<td>Street Address</td>
<td>Apt. #</td>
<td>City (Country)</td>
<td>State</td>
<td>ZIP Code</td>
<td>Telephone Number</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>#5</th>
<th>Month/Year</th>
<th>Month/Year To</th>
<th>Street Address</th>
<th>Apt. #</th>
<th>City (Country)</th>
<th>State</th>
<th>ZIP Code</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Name of Person Who Knew You</td>
<td>Street Address</td>
<td>Apt. #</td>
<td>City (Country)</td>
<td>State</td>
<td>ZIP Code</td>
<td>Telephone Number</td>
<td></td>
</tr>
</tbody>
</table>

Where You Went to School

List the schools you have attended, beyond Junior High School, beginning with the most recent (#1) and working back 7 years. List all College or University degrees and the dates they were received. If all of your education occurred more than 7 years ago, list your most recent education beyond high school, no matter when that education occurred.

- Use one of the following codes in the "Code" block:
  1 - High School
  2 - College/University/Military College
  3 - Vocational/Technical/Trade School

- For schools you attended in the past 3 years, list a person who knew you at school (an instructor, student, etc.). Do not list people for education completely outside this 3-year period.

- For correspondence schools and extension classes, provide the address where the records are maintained.

<table>
<thead>
<tr>
<th>#1</th>
<th>Month/Year</th>
<th>Month/Year To</th>
<th>Code</th>
<th>Name of School</th>
<th>Degree/Diploma/Other</th>
<th>Month/Year Awarded</th>
<th>Street Address and City (Country) of School</th>
<th>State</th>
<th>ZIP Code</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Name of Person Who Knew You</td>
<td>Street Address</td>
<td>Apt. #</td>
<td>City (Country)</td>
<td>State</td>
<td>ZIP Code</td>
<td>Telephone Number</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>#2</th>
<th>Month/Year</th>
<th>Month/Year To</th>
<th>Code</th>
<th>Name of School</th>
<th>Degree/Diploma/Other</th>
<th>Month/Year Awarded</th>
<th>Street Address and City (Country) of School</th>
<th>State</th>
<th>ZIP Code</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Name of Person Who Knew You</td>
<td>Street Address</td>
<td>Apt. #</td>
<td>City (Country)</td>
<td>State</td>
<td>ZIP Code</td>
<td>Telephone Number</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>#3</th>
<th>Month/Year</th>
<th>Month/Year To</th>
<th>Code</th>
<th>Name of School</th>
<th>Degree/Diploma/Other</th>
<th>Month/Year Awarded</th>
<th>Street Address and City (Country) of School</th>
<th>State</th>
<th>ZIP Code</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Name of Person Who Knew You</td>
<td>Street Address</td>
<td>Apt. #</td>
<td>City (Country)</td>
<td>State</td>
<td>ZIP Code</td>
<td>Telephone Number</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Enter your Social Security Number before going to the next page
**YOUR EMPLOYMENT ACTIVITIES**

List your employment activities, beginning with the present (#1) and working back 7 years. You should list all full-time work, part-time work, military service, temporary military duty locations over 90 days, self-employment, other paid work, and all periods of unemployment. The entire 7-year period must be accounted for without breaks, but you need not list employments before your 16th birthday.

**Code.** Use one of the codes listed below to identify the type of employment:

1 - Active military duty stations
2 - National Guard/Reserve
3 - U.S.P.H.S. Commissioned Corps
4 - Other Federal employment
5 - State Government (Non-Federal employment)
6 - Self-employment (Include business and/or name of person who can verify)
7 - Unemployment (Include name of person who can verify)
8 - Federal Contractor (List Contractor, not Federal agency)
9 - Other

**Employer/Verifier Name.** List the business name of your employer or the name of the person who can verify your self-employment or unemployment in this block. If military service is being listed, include your duty location or home port here as well as your branch of service. You should provide separate listings to reflect changes in your military duty locations or home ports.

**Previous Periods of Activity.** Complete these lines if you worked for an employer on more than one occasion at the same location. After entering the most recent period of employment in the initial numbered block, provide previous periods of employment at the same location on the additional lines provided. For example, if you worked at XY Plumbing in Denver, CO, during 3 separate periods of time, you would enter dates and information concerning the most recent period of employment first, and provide dates, position titles, and supervisors for the two previous periods of employment on the lines below that information.

<table>
<thead>
<tr>
<th>#1</th>
<th>Month/Year To Present</th>
<th>Code</th>
<th>Employer/Verifier Name/Military Duty Location</th>
<th>Your Position Title/Military Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>City (Country) State ZIP Code Telephone Number</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Employer's/Verifier's Street Address</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Street Address of Job Location (if different than Employer's Address)</td>
<td>City (Country) State ZIP Code Telephone Number</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Supervisor's Name &amp; Street Address (if different than Job Location)</td>
<td>City (Country) State ZIP Code Telephone Number</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Previous Periods of Activity (Block #2)**

<table>
<thead>
<tr>
<th>Month/Year To</th>
<th>Code</th>
<th>Employer/Verifier Name/Military Duty Location</th>
<th>Your Position Title/Military Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>City (Country) State ZIP Code Telephone Number</td>
<td></td>
</tr>
</tbody>
</table>

**Previous Periods of Activity (Block #3)**

Enter your Social Security Number before going to the next page.
### YOUR EMPLOYMENT ACTIVITIES (CONTINUED)

<table>
<thead>
<tr>
<th>Month/Year</th>
<th>Month/Year</th>
<th>Code</th>
<th>Employer/Verifier Name/Military Duty Location</th>
<th>Your Position Title/Military Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>To</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employer’s/Verifier’s Street Address</td>
<td>City (Country)</td>
<td>State</td>
<td>ZIP Code</td>
<td>Telephone Number</td>
</tr>
<tr>
<td>Street Address of Job Location (if different than Employer’s Address)</td>
<td>City (Country)</td>
<td>State</td>
<td>ZIP Code</td>
<td>Telephone Number</td>
</tr>
<tr>
<td>Supervisor’s Name &amp; Street Address (if different than Job Location)</td>
<td>City (Country)</td>
<td>State</td>
<td>ZIP Code</td>
<td>Telephone Number</td>
</tr>
</tbody>
</table>

#### PREVIOUS PERIODS OF ACTIVITY (Block #4)

<table>
<thead>
<tr>
<th>Month/Year</th>
<th>Month/Year</th>
<th>Position Title</th>
<th>Supervisor</th>
</tr>
</thead>
<tbody>
<tr>
<td>To</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>To</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### PREVIOUS PERIODS OF ACTIVITY (Block #5)

<table>
<thead>
<tr>
<th>Month/Year</th>
<th>Month/Year</th>
<th>Position Title</th>
<th>Supervisor</th>
</tr>
</thead>
<tbody>
<tr>
<td>To</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>To</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### PREVIOUS PERIODS OF ACTIVITY (Block #6)

<table>
<thead>
<tr>
<th>Month/Year</th>
<th>Month/Year</th>
<th>Position Title</th>
<th>Supervisor</th>
</tr>
</thead>
<tbody>
<tr>
<td>To</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>To</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### YOUR EMPLOYMENT RECORD

Has any of the following happened to you in the last 7 years? If “Yes,” begin with the most recent occurrence and go backward, providing date fired, quit, or left, and other information requested.

Use the following codes and explain the reason your employment was ended:

1 - Fired from a job
2 - Quit a job after being told you’d be fired
3 - Left a job by mutual agreement following allegations of misconduct
4 - Left a job by mutual agreement following allegations of unsatisfactory performance
5 - Left a job for other reasons under unfavorable circumstances

<table>
<thead>
<tr>
<th>Month/Year</th>
<th>Code</th>
<th>Specify Reason</th>
<th>Employer’s Name and Address (Include city/Country if outside U.S.)</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
</table>

Enter your Social Security Number before going to the next page

---

Page 4
13 PEOPLE WHO KNOW YOU WELL
List three people who know you well and live in the United States. They should be good friends, peers, colleagues, college roommates, etc., whose combined association with you covers as well as possible the last 7 years. Do not list your spouse, former spouses, or other relatives, and try not to list anyone who is listed elsewhere on this form.

<table>
<thead>
<tr>
<th>Name</th>
<th>Dates Known</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Month/Year</td>
<td>Month/Year</td>
</tr>
<tr>
<td>Home or Work Address</td>
<td>City (Country)</td>
<td>State ZIP Code</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name</th>
<th>Dates Known</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Month/Year</td>
<td>Month/Year</td>
</tr>
<tr>
<td>Home or Work Address</td>
<td>City (Country)</td>
<td>State ZIP Code</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name</th>
<th>Dates Known</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Month/Year</td>
<td>Month/Year</td>
</tr>
<tr>
<td>Home or Work Address</td>
<td>City (Country)</td>
<td>State ZIP Code</td>
</tr>
</tbody>
</table>

14 YOUR MARITAL STATUS
Mark one of the following boxes to show your current marital status:

- 1 - Never married (go to question 15)
- 2 - Married
- 3 - Separated
- 4 - Legally Separated
- 5 - Divorced
- 6 - Widowed

Current Spouse Complete the following about your current spouse.

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Date of Birth (Mo./Day/Yr.)</th>
<th>Place of Birth (Include country if outside the U.S.)</th>
<th>Social Security Number</th>
</tr>
</thead>
</table>

Other Names Used (Specify maiden name, names by other marriages, etc., and show dates used for each name)

<table>
<thead>
<tr>
<th>Country of Citizenship</th>
<th>Date Married (Mo./Day/Yr.)</th>
<th>Place Married (Include country if outside the U.S.)</th>
<th>State</th>
</tr>
</thead>
</table>

If Separated, Date of Separation (Mo./Day/Yr.) If Legally Separated, Where is the Record Located? City (Country)

<table>
<thead>
<tr>
<th>Address of Current Spouse (Street, city, and country if outside the U.S.)</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
</table>

15 YOUR RELATIVES
Give the full name, correct code, and other requested information for each of your relatives, living or dead, specified below.

1 - Mother (first) 3 - Stepmother 5 - Foster Parent 7 - Stepchild
2 - Father (second) 4 - Stepfather 6 - Child (adopted also)

<table>
<thead>
<tr>
<th>Full Name (if deceased, check box on the left before entering name)</th>
<th>Code</th>
<th>Date of Birth (Month/Day/Year)</th>
<th>Country of Birth</th>
<th>Country(ies) of Citizenship</th>
<th>Current Street Address and City (country) of Living Relatives</th>
<th>State</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### YOUR MILITARY HISTORY

1. Have you served in the United States military?
2. Have you served in the United States Merchant Marine?

List all of your military service below, including service in Reserve, National Guard, and U.S. Merchant Marine. Start with the most recent period of service (#1) and work backward. If you had a break in service, each separate period should be listed.

**Code.** Use one of the codes listed below to identify your branch of service:

- 1 - Air Force
- 2 - Army
- 3 - Navy
- 4 - Marine Corps
- 5 - Coast Guard
- 6 - Merchant Marine
- 7 - National Guard

**O/E.** Mark "O" block for Officer or "E" block for Enlisted.

**Status.** "X" the appropriate block for the status of your service during the time that you served. If your service was in the National Guard, do not use an "X": use the two-letter code for the state to mark the block.

**Country.** If your service was with other than the U.S. Armed Forces, identify the country for which you served.

<table>
<thead>
<tr>
<th>Month/Year</th>
<th>Month/Year</th>
<th>Code</th>
<th>Service/Certificate No.</th>
<th>O</th>
<th>E</th>
<th>Active</th>
<th>Active</th>
<th>Inactive</th>
<th>National Guard (State)</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### YOUR SELECTIVE SERVICE RECORD

4. Have you registered with the Selective Service System? If "Yes," provide your registration number. If "No," show the reason for your legal exemption below.

<table>
<thead>
<tr>
<th>Registration Number</th>
<th>Legal Exemption Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### YOUR INVESTIGATIONS RECORD

5. Has the United States Government ever investigated your background and/or granted you a security clearance? If "Yes," use the codes that follow to provide the requested information below. If "Yes," but you can't recall the investigating agency and/or the security clearance received, enter "Other" agency code or clearance code, as appropriate, and "Don't know" or "Don't recall" under the "Other Agency" heading, below. If your response is "No," or you don't know or can't recall if you were investigated and cleared, check the "No" box.

<table>
<thead>
<tr>
<th>Month/Year</th>
<th>Agency Code</th>
<th>Other Agency</th>
<th>Clearance Code</th>
<th>Month/Year</th>
<th>Agency Code</th>
<th>Other Agency</th>
<th>Clearance Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

6. To your knowledge, have you ever had a clearance or access authorization denied, suspended, or revoked, or have you ever been debarred from government employment? If "Yes," give date of action and agency. **Note:** An administrative downgrade or termination of a security clearance is not a revocation.

<table>
<thead>
<tr>
<th>Month/Year</th>
<th>Department or Agency Taking Action</th>
<th>Month/Year</th>
<th>Department or Agency Taking Action</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### FOREIGN COUNTRIES YOU HAVE VISITED

List foreign countries you have visited, except on travel under official Government orders, beginning with the most current (#1) and working back 7 years. (Travel as a dependent or contractor must be listed.)

7. Use one of these codes to indicate the purpose of your visit: 1 - Business 2 - Pleasure 3 - Education 4 - Other

8. Include short trips to Canada or Mexico. If you have lived near a border and have made short (one day or less) trips to the neighboring country, you do not need to list each trip. Instead, provide the time period, the code, the country, and a note ("Many Short Trips").

9. Do not repeat travel covered in items 9, 10, or 11.

<table>
<thead>
<tr>
<th>Month/Year</th>
<th>Month/Year</th>
<th>Code</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1</td>
<td>To</td>
<td></td>
<td>#5</td>
</tr>
<tr>
<td>#2</td>
<td>To</td>
<td></td>
<td>#6</td>
</tr>
<tr>
<td>#3</td>
<td>To</td>
<td></td>
<td>#7</td>
</tr>
<tr>
<td>#4</td>
<td>To</td>
<td></td>
<td>#8</td>
</tr>
</tbody>
</table>

Enter your Social Security Number before going to the next page
**20 YOUR POLICE RECORD** *(Do not include anything that happened before your 18th birthday.)*

In the last 7 years, have you been arrested for, charged with, or convicted of any offense(s)? (Leave out traffic fines of less than $150.)

<table>
<thead>
<tr>
<th>Month/Year</th>
<th>Offense</th>
<th>Action Taken</th>
<th>Law Enforcement Authority or Court <em>(City and county/country if outside the U.S.)</em></th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you answered “Yes,” explain your answer(s) in the space provided.

**21 ILLEGAL DRUGS**

The following questions pertain to the illegal use of drugs or drug activity. You are required to answer the questions fully and truthfully, and your failure to do so could be grounds for an adverse employment decision or action against you, but neither your truthful responses nor information derived from your responses will be used as evidence against you in any subsequent criminal proceeding.

4 In the last year, have you illegally used any controlled substance, for example, marijuana, cocaine, crack cocaine, hashish, narcotics (opium, morphine, codeine, heroin, etc.), amphetamines, depressants (barbiturates, methaqualone, tranquilizers, etc.), hallucinogens (LSD, PCP, etc.), or prescription drugs?

5 In the last 7 years, have you been involved in the illegal purchase, manufacture, trafficking, production, transfer, shipping, receiving, or sale of any narcotic, depressant, stimulant, hallucinogen, or cannabis, for your own intended profit or that of another?

If you answered “Yes” to "a" above, provide information relating to the types of substance(s), the nature of the activity, and any other details relating to your involvement with illegal drugs. Include any treatment or counseling received.

<table>
<thead>
<tr>
<th>Month/Year</th>
<th>Month/Year</th>
<th>Controlled Substance/Prescription Drug Used</th>
<th>Number of Times Used</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**22 YOUR FINANCIAL RECORD**

4 In the last 7 years, have you, or a company over which you exercised some control, filed for bankruptcy, been declared bankrupt, been subject to a tax lien, or had legal judgment rendered against you for a debt? If you answered “Yes,” provide date of initial action and other information requested below.

<table>
<thead>
<tr>
<th>Month/Year</th>
<th>Type of Action</th>
<th>Name Action Occurred Under</th>
<th>Name/Address of Court or Agency Handling Case</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

6 Are you now over 180 days delinquent on any loan or financial obligation? Include loans or obligations funded or guaranteed by the Federal Government.

If you answered “Yes,” provide the information requested below:

<table>
<thead>
<tr>
<th>Month/Year</th>
<th>Type of Loan or Obligation and Account #</th>
<th>Name/Address of Creditor or Obligees</th>
<th>State</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

After completing this form and any attachments, you should review your answers to all questions to make sure the form is complete and accurate, and then sign and date the following certification and sign and date the release on Page 8.

**Certification That My Answers Are True**

My statements on this form, and any attachments to it, are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that a knowing and willful false statement on this form can be punished by fine or imprisonment or both. (See section 1001 of title 18, United States Code).

Signature (Sign in ink)  

Date

Enter your Social Security Number before going to the next page
UNITED STATES OF AMERICA

AUTHORIZATION FOR RELEASE OF INFORMATION

Carefully read this authorization to release information about you, then sign and date it in ink.

I Authorize any investigator, special agent, or other duly accredited representative of the authorized Federal agency conducting my background investigation, to obtain any information relating to my activities from individuals, schools, residential management agents, employers, criminal justice agencies, credit bureaus, consumer reporting agencies, collection agencies, retail business establishments, or other sources of information. This information may include, but is not limited to, my academic, residential, achievement, performance, attendance, disciplinary, employment history, criminal history record information, and financial and credit information. I authorize the Federal agency conducting my investigation to disclose the record of my background investigation to the requesting agency for the purpose of making a determination of suitability or eligibility for a security clearance.

I Understand that, for financial or lending institutions, medical institutions, hospitals, health care professionals, and other sources of information, a separate specific release will be needed, and I may be contacted for such a release at a later date. Where a separate release is requested for information relating to mental health treatment or counseling, the release will contain a list of the specific questions, relevant to the job description, which the doctor or therapist will be asked.

I Further Authorize any investigator, special agent, or other duly accredited representative of the U.S. Office of Personnel Management, the Federal Bureau of Investigation, the Department of Defense, the Defense Investigative Service, and any other authorized Federal agency, to request criminal record information about me from criminal justice agencies for the purpose of determining my eligibility for assignment to, or retention in a sensitive National Security position, in accordance with 5 U.S.C. 9101. I understand that I may request a copy of such records as may be available to me under the law.

I Authorize custodians of records and other sources of information pertaining to me to release such information upon request of the investigator, special agent, or other duly accredited representative of any Federal agency authorized above regardless of any previous agreement to the contrary.

I Understand that the information released by records custodians and sources of information is for official use by the Federal Government only for the purposes provided in this Standard Form 85P, and that it may be redisclosed by the Government only as authorized by law.

Copies of this authorization that show my signature are as valid as the original release signed by me. This authorization is valid for five (5) years from the date signed or upon the termination of my affiliation with the Federal Government, whichever is sooner.

<table>
<thead>
<tr>
<th>Signature (Sign in ink)</th>
<th>Full Name (Type or Print Legibly)</th>
<th>Date Signed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Names Used</th>
<th>Social Security Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Current Address (Street, City)</th>
<th>State</th>
<th>ZIP Code</th>
<th>Home Telephone Number (Include Area Code)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
UNITED STATES OF AMERICA

AUTHORIZATION FOR RELEASE OF MEDICAL INFORMATION

Carefully read this authorization to release information about you, then sign and date it in black ink.

Instructions for Completing this Release

This is a release for the investigator to ask your health practitioner(s) the three questions below concerning your mental health consultations. Your signature will allow the practitioner(s) to answer only these questions.

I am seeking assignment to or retention in a position of public trust with the Federal Government as a(n)

(Investigator instructed to write in position title.)

As part of the investigative process, I hereby authorize the investigator, special agent, or duly accredited representative of the authorized Federal agency conducting my background investigation, to obtain the following information relating to my mental health consultations:

Does the person under investigation have a condition or treatment that could impair his/her judgment or reliability?

If so, please describe the nature of the condition and the extent and duration of the impairment or treatment.

What is the prognosis?

I understand that the information released pursuant to this release is for use by the Federal Government only for purposes provided in the Standard Form 85P and that it may be redisclosed by the Government only as authorized by law.

Copies of this authorization that show my signature are as valid as the original release signed by me. This authorization is valid for 1 year from the date signed or upon termination of my affiliation with the Federal Government, whichever is sooner.

<table>
<thead>
<tr>
<th>Signature (Sign in ink)</th>
<th>Full Name (Type or Print Legibly)</th>
<th>Date Signed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other Names Used</td>
<td>Social Security Number</td>
<td></td>
</tr>
<tr>
<td>Current Address (Street, City)</td>
<td>State</td>
<td>ZIP Code</td>
</tr>
</tbody>
</table>


<p>| | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>DATE</td>
<td>SIGNATURE OF OFFICIAL TAKING FINGERPRINTS</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>EMPLOYER AND ADDRESS</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>REASON FINGERPRINTED</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CITIZENSHIP CTZ</td>
<td>SEX</td>
<td>RACE</td>
<td>HGT.</td>
<td>WGT.</td>
<td>EYES</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>RESIDENCE OF PERSON FINGERPRINTED</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>LAST NAME</td>
<td>FIRST NAME</td>
<td>MIDDLE NAME</td>
<td>FBI</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ALIASES AKA</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
APPLICANT

FINGERPRINT CARDS & TRAINING AIDS'. Direct questions to the Identification and Investigative Services Section's Customer Service Group at (304) 625-5590 or by e-mail at <liaison@leo.gov>.

PRIVACY ACT STATEMENT

** MISCELLANEOUS NO. - RECORD: OTHER ARMED FORCES NO. PASSPORT NO. [FP], ALIEN REGISTRATION NO. (AR), PORT SECURITY CARD NO. (PS), SELECTIVE SERVICE NO. (SS) VETERANS' ADMINISTRATION CLAIM NO. (VA).
Declaration for Federal Employment*
(*This form may also be used to assess fitness for federal contract employment)

Instructions

The information collected on this form is used to determine your acceptability for Federal and Federal contract employment and your enrollment status in the Government's Life Insurance program. You may be asked to complete this form at any time during the hiring process. Follow instructions that the agency provides. If you are selected, before you are appointed you will be asked to update your responses on this form and on other materials submitted during the application process and then to recertify that your answers are true.

All your answers must be truthful and complete. A false statement on any part of this declaration or attached forms or sheets may be grounds for not hiring you, or for firing you after you begin work. Also, you may be punished by a fine or imprisonment (U.S. Code, title 18, section 1001).

Either type your responses on this form or print clearly in dark ink. If you need additional space, attach letter-size sheets (8.5" X 11"). Include your name, Social Security Number, and item number on each sheet. We recommend that you keep a photocopy of your completed form for your records.

Privacy Act Statement

The Office of Personnel Management is authorized to request this information under sections 1302, 3301, 3304, 3328, and 8716 of title 5, U.S. Code. Section 1104 of title 5 allows the Office of Personnel Management to delegate personnel management functions to other Federal agencies. If necessary, and usually in conjunction with another form or forms, this form may be used in conducting an investigation to determine your suitability or your ability to hold a security clearance, and it may be disclosed to authorized officials making similar, subsequent determinations.

Your Social Security Number (SSN) is needed to keep our records accurate, because other people may have the same name and birth date. Public Law 104-134 (April 26, 1996) asks Federal agencies to use this number to help identify individuals in agency records. Giving us your SSN or any other information is voluntary. However, if you do not give us your SSN or any other information requested, we cannot process your application. Incomplete addresses and ZIP Codes may also slow processing.

ROUTINE USES: Any disclosure of this record or information in this record is in accordance with routine uses found in System Notice OPM/GC-6-1, General Personnel Records. This system allows disclosure of information to: training facilities; organizations deciding claims for retirement, insurance, unemployment, or health benefits; officials in litigation or administrative proceedings where the Government is a party; law enforcement agencies concerning a violation of law or regulation; Federal agencies for statistical reports and studies; officials of labor organizations recognized by law in connection with representation of employees; Federal agencies or other sources requesting information for Federal agencies in connection with hiring or retaining, security clearance, security or suitability investigations, classifying jobs, contracting, or issuing licenses, grants, or other benefits; public and private organizations, including news media, which grant or publicize employee employment or awards; the Merit Systems Protection Board, the Office of Special Counsel, the Equal Employment Opportunity Commission, the Federal Labor Relations Authority, the National Archives and Records Administration, and Congressional offices in connection with their official functions; prospective non-Federal employers concerning tenure of employment, civil service status, length of service, and the date and nature of action for separation as shown on the SF 50 (or authorized exception) of a specifically identified individual; requesting organizations or individuals concerning the home address and other relevant information on those who might have contracted an illness or been exposed to a health hazard; authorized Federal and non-Federal agencies for use in computer matching; spouses or dependent children asking whether the employee has changed from a self-and-family to a self-only health benefits enrollment; individuals working on a contract, service, grant, cooperative agreement, or job for the Federal government; non-agency members of an agency's performance or other panel; and agency-appointed representatives of employees concerning information issued to the employees about fitness-for-duty or agency-filed disability retirement procedures.

Public Burden Statement

Public burden reporting for this collection of information is estimated to vary from 5 to 30 minutes with an average of 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to the U.S. Office of Personnel Management, Reports and Forms Manager (3206-0182), Washington, DC 20415-7900. The OMB number, 3206-0182, is valid. OPM may not collect this information, and you are not required to respond, unless this number is displayed.

U.S. Office of Personnel Management
5 U.S.C. 1302, 3301, 3304, 3328 & 8716
Declaration for Federal Employment*

(*This form may also be used to assess fitness for federal contract employment)

GENERAL INFORMATION

1. FULL NAME (Provide your full name. If you have only initials in your name, provide them and indicate "Initial only". If you do not have a middle name, indicate "No Middle Name". If you are a "Jr.", "Sr.", etc. enter this under Suffix. First, Middle, Last, Suffix)

2. SOCIAL SECURITY NUMBER

3. PLACE OF BIRTH (Include city and state or country)

3b. ARE YOU A U.S. CITIZEN?

☐ YES ☐ NO (If "NO", provide country of citizenship)

4. DATE OF BIRTH (MM/DD/YYYY)

5. OTHER NAMES EVER USED (For example, maiden name, nickname, etc)

Selective Service Registration

If you are a male born after December 31, 1959, and are at least 18 years of age, civil service employment law (5 U.S.C. 3328) requires that you register with the Selective Service System, unless you meet certain exemptions.

7a. Are you a male born after December 31, 1959?

☐ YES ☐ NO (If "NO", proceed to 8.)

7b. Have you registered with the Selective Service System?

☐ YES (If "YES", proceed to 8.) ☐ NO (If "NO", proceed to 7c.)

nc. If "NO," describe your reason(s) in item 16.

Military Service

8. Have you ever served in the United States military?

☐ YES (If "YES", provide information below) ☐ NO

If you answered "YES," list the branch, dates, and type of discharge for all active duty.

If your only active duty was training in the Reserves or National Guard, answer "NO."

<table>
<thead>
<tr>
<th>Branch</th>
<th>From (MM/DD/YYYY)</th>
<th>To (MM/DD/YYYY)</th>
<th>Type of Discharge</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Background Information

For all questions, provide all additional requested information under item 16 or on attached sheets. The circumstances of each event you list will be considered. However, in most cases you can still be considered for Federal jobs.

For questions 9, 10, and 11, your answers should include convictions resulting from a plea of nolo contendere (no contest), but omit (1) traffic fines of $300 or less, (2) any violation of law committed before your 16th birthday, (3) any violation of law committed before your 18th birthday if finally decided in juvenile court or under a Youth Offender law, (4) any conviction set aside under the Federal Youth Corrections Act or similar state law, and (5) any conviction for which the record was expunged under Federal or state law.

9. During the last 7 years, have you been convicted, been imprisoned, been on probation, or been on parole?

(Includes felonies, firearms or explosives violations, misdemeanors, and all other offenses.) If "YES," use item 16 to provide the date, explanation of the violation, place of occurrence, and the name and address of the police department or court involved.

10. Have you been convicted by a military court-martial in the past 7 years? (If no military service, answer "NO.") If "YES," use item 16 to provide the date, explanation of the violation, place of occurrence, and the name and address of the military authority or court involved.

11. Are you currently under charges for any violation of law? If "YES," use item 16 to provide the date, explanation of the violation, place of occurrence, and the name and address of the police department or court involved.

12. During the last 5 years, have you been fired from any job for any reason, did you quit after being told that you would be fired, did you leave any job by mutual agreement because of specific problems, or were you debarred from Federal employment by the Office of Personnel Management or any other Federal agency? If "YES," use item 16 to provide the date, explanation of the problem, reason for leaving, and the employer's name and address.

13. Are you delinquent on any Federal debt? (Includes delinquencies arising from Federal taxes, loans, overpayment of benefits, and other debts to the U.S. Government, plus defaults of Federally guaranteed or insured loans such as student and home mortgage loans.) If "YES," use item 16 to provide the type, length, and amount of the delinquency or default, and steps that you are taking to correct the error or repay the debt.
Declaration for Federal Employment*

(*This form may also be used to assess fitness for federal contract employment)

Additional Questions

14. Do any of your relatives work for the agency or government organization to which you are submitting this form? (Include: father, mother, husband, wife, son, daughter, brother, sister, uncle, aunt, first cousin, nephew, niece, father-in-law, mother-in-law, son-in-law, daughter-in-law, brother-in-law, sister-in-law, stepfather, stepmother, stepson, stepdaughter, stepbrother, stepsister, half brother, and half sister.) If "YES," use item 16 to provide the relative's name, relationship, and the department, agency, or branch of the Armed Forces for which your relative works.

[ ] YES [ ] NO

15. Do you receive, or have you ever applied for, retirement pay, pension, or other retired pay based on military, Federal civilian, or District of Columbia Government service?

[ ] YES [ ] NO

Continuation Space / Agency Optional Questions

16. Provide details requested in items 7 through 15 and 18c in the space below or on attached sheets. Be sure to identify attached sheets with your name, Social Security Number, and item number, and to include ZIP Codes in all addresses. If any questions are printed below, please answer as instructed (these questions are specific to your position and your agency is authorized to ask them).

Certifications / Additional Questions

APPLICANT: If you are applying for a position and have not yet been selected, carefully review your answers on this form and any attached sheets. When this form and all attached materials are accurate, read item 17, and complete 17a.

APPOINTEE: If you are being appointed, carefully review your answers on this form and any attached sheets, including any other application materials that your agency has attached to this form. If any information requires correction to be accurate as of the date you are signing, make changes on this form or the attachments and/or provide updated information on additional sheets, initialing and dating all changes and additions. When this form and all attached materials are accurate, read item 17, complete 17b, read 18, and answer 18a, 18b, and 18c as appropriate.

17. I certify that, to the best of my knowledge and belief, all of the information on and attached to this Declaration for Federal Employment, including any attached application materials, is true, correct, complete, and made in good faith. I understand that a false or fraudulent answer to any question or item on any part of this declaration or its attachments may be grounds for not hiring me, or for firing me after I begin work, and may be punishable by fine or imprisonment. I understand that any information I give may be investigated for purposes of determining eligibility for Federal employment as allowed by law or Presidential order. I consent to the release of information about my ability and fitness for Federal employment by employers, schools, law enforcement agencies, and other individuals and organizations to investigators, personnel specialists, and other authorized employees or representatives of the Federal Government. I understand that for financial or lending institutions, medical institutions, hospitals, health care professionals, and some other sources of information, a separate specific release may be needed, and I may be contacted for such a release at a later date.

17a. Applicant's Signature: ___________________________ Date __________
(Sign in ink)

17b. Appointee's Signature: ___________________________ Date __________
(Sign in ink)

Appointing Officer:
Enter Date of Appointment or Conversion
MM / DD / YYYY

18. Appointee (Only respond if you have been employed by the Federal Government before): Your elections of life insurance during previous Federal employment may affect your eligibility for life insurance during your new appointment. These questions are asked to help your personnel office make a correct determination.

18a. When did you leave your last Federal job? ___________________________ DATE: MM / DD / YYYY

18b. When you worked for the Federal Government the last time, did you waive Basic Life Insurance or any type of optional life insurance? [ ] YES [ ] NO [ ] DO NOT KNOW

18c. If you answered "YES" to item 18b, did you later cancel the waiver(s)? If your answer to item 18c is "NO," use item 16 to identify the type(s) of insurance for which waivers were not canceled. [ ] YES [ ] NO [ ] DO NOT KNOW
FAIR CREDIT AUTHORIZATION FORM

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. For more information, including information about additional rights, go to www.ftc.gov/credit or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.

- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
  - a person has taken adverse action against you because of information in your credit report;
  - you are the victim of identify theft and place a fraud alert in your file;
  - your file contains inaccurate information as a result of fraud;
  - you are on public assistance;
  - you are unemployed but expect to apply for employment within 60 days.
In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.ftc.gov/credit for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.ftc.gov/credit for an explanation of dispute procedures.

- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
• **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to [www.ftc.gov/credit](http://www.ftc.gov/credit).

• **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).

• **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

• **Identity theft victims and active duty military personnel have additional rights.** For more information, visit [www.ftc.gov/credit](http://www.ftc.gov/credit).

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:

<table>
<thead>
<tr>
<th>TYPE OF BUSINESS</th>
<th>CONTACT</th>
</tr>
</thead>
</table>
| Consumer reporting agencies, creditors and others not listed below | Federal Trade Commission: Consumer Response Center - FCRA  
Washington, DC 20580  
1-877-382-4357 |
| National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name) | Office of the Comptroller of the Currency  
Compliance Management, Mail Stop 6-6  
Washington, DC 20219  
800-613-6743 |
| Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks) | Federal Reserve Consumer Help (FRCH)  
P O Box 1200  
Minneapolis, MN 55480  
Telephone: 888-851-1920  
Website Address: [www.federalreserveconsumerhelp.gov](http://www.federalreserveconsumerhelp.gov)  
Email Address: ConsumerHelp@FederalReserve.gov |
| Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name) | Office of Thrift Supervision  
Consumer Complaints  
Washington, DC 20552  
800-842-6929 |
| Federal credit unions (words "Federal Credit Union" appear in institution's name) | National Credit Union Administration  
1775 Duke Street  
Alexandria, VA 22314  
703-519-4600 |
| State-chartered banks that are not members of the Federal Reserve System | Federal Deposit Insurance Corporation  
Consumer Response Center, 2345 Grand Avenue, Suite 100  
Kansas City, Missouri 64108-2638  
1-877-275-3342 |
| Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission | Department of Transportation, Office of Financial Management  
Washington, DC 20590  
202-366-1306 |
| Activities subject to the Packers and Stockyards Act, 1921 | Department of Agriculture  
Office of Deputy Administrator - GIPSA  
Washington, DC 20250  
202-720-7051 |
Federal Investigations Notice

Fair Credit Reporting Act of 1970, as amended

PLEASE TAKE NOTICE THAT ONE OR MORE CONSUMER CREDIT REPORTS MAY BE OBTAINED FOR EMPLOYMENT PURPOSES PURSUANT TO THE FAIR CREDIT REPORTING ACT, AS AMENDED, 15 U. S. C., §1681, ET SEQ. SHOULD A DECISION TO TAKE ANY ADVERSE ACTION AGAINST YOU BE MADE, BASED EITHER IN WHOLE OR IN PART ON THE CONSUMER CREDIT REPORT, THE CONSUMER REPORTING AGENCY THAT PROVIDED THE REPORT PLAYED NO ROLE IN THE AGENCY'S DECISION TO TAKE SUCH ADVERSE ACTION.

Information provided by you on this form will be furnished to the consumer reporting agency in order to obtain information in connection with an investigation to determine your (1) fitness for Federal employment, (2) clearance to perform contractual service for the Federal Government, and/or (3) security clearance or access. The information obtained may be redisclosed to other Federal agencies for the above purposes and in fulfillment of official responsibilities to the extent that such disclosure is permitted by law.

I hereby authorize the ___________________________ to obtain such report(s) from any
(Name of Requesting Agency)
consumer/credit reporting agency for employment purposes.

________________________  __________________________
(Print Name)  (SSN)

________________________  __________________________
(Signature)  (Date)

Your Social Security Number is needed to keep records accurate, because other people may have the same name. Executive Order 9397 also asks Federal agencies to use this number to help identify individuals in agency records.
SYSTEM INFORMATION

TYPE OF PROPOSED MAINFRAME PLATFORM _____________________________________________

TYPE OF PERSONAL COMPUTER ____________________________________________________

MEDIA TO BE USED FOR RECEIPT OF FILE TRANSMISSION ______________________________

FILE STORAGE MEDIUM __________________________________________________________

CYBERFUSION INSTALLED? __________________________________________________________

AMOUNT OF AVAILABLE FILE STORAGE SPACE _________________________________________

TYPE OF PRINT STREAM MAIL RUN CONTROL SYSTEM _________________________________

TYPE OF NETWORK PLATFORM (i.e., NOVELL/NT/UNIX) ________________________________
100% Accountability and Summary Reports

Full Audit report must include the following information (reprints must have the same information):

1. Program Number/Job Name/Print Order/File Date
2. PC#/Sequence numbers/Total Volume
3. Inserter ID and Operator
4. Date of insertion
5. Start and End time
6. Start and End Range (sequence numbers)
7. Total for each Start and End Range
8. Event (i.e. Processed, Spoiled, Diverted and reason: Missing Piece, Unverified, Misread etc.)
9. Status (i.e. Inserted, Routed to Reprint Area, etc.)
10. Totals
   a. Machine inserted
   b. Sent to Reprint
   c. Reprints Recovered
   d. Records Accounted For
   e. Duplicates
   f. Duplicated Verified
   g. Records less duplicates
   h. Reported Output
   i. Variances

Example:

<table>
<thead>
<tr>
<th>Inserter ID</th>
<th>Date</th>
<th>Start Time</th>
<th>End Time</th>
<th>Start Range</th>
<th>End Range</th>
<th>Total</th>
<th>EVENT</th>
<th>STATUS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inserter 1</td>
<td>05/10/12</td>
<td>10:31:04 AM</td>
<td>11:12:45 AM</td>
<td>19386</td>
<td>21567</td>
<td>2182</td>
<td>Standard Processing</td>
<td>Inserted</td>
</tr>
<tr>
<td>Operator Joe</td>
<td>05/10/12</td>
<td>11:12:50 AM</td>
<td>11:12:50 AM</td>
<td>21568</td>
<td>1</td>
<td>Diverted</td>
<td>Routing to Reprint</td>
<td></td>
</tr>
<tr>
<td></td>
<td>05/10/12</td>
<td>11:13:10 AM</td>
<td>11:28:06 AM</td>
<td>21569</td>
<td>22516</td>
<td>948</td>
<td>Standard Processing</td>
<td>Inserted</td>
</tr>
<tr>
<td></td>
<td>05/10/12</td>
<td>11:28:07 AM</td>
<td>11:28:10 AM</td>
<td>22517</td>
<td>22518</td>
<td>2</td>
<td>Diverted/leave count unverified</td>
<td>Routing to Reprint</td>
</tr>
<tr>
<td></td>
<td>05/10/12</td>
<td>11:29:30 AM</td>
<td>11:29:35 AM</td>
<td>22519</td>
<td>22521</td>
<td>3</td>
<td>Diverted/missing piece</td>
<td>Routing to Reprint</td>
</tr>
<tr>
<td></td>
<td>05/10/12</td>
<td>11:29:45 AM</td>
<td>11:30:15 AM</td>
<td>22522</td>
<td>1</td>
<td>Diverted/manual insertion of pub</td>
<td>Manual Scan</td>
<td></td>
</tr>
<tr>
<td></td>
<td>05/10/12</td>
<td>11:30:34 AM</td>
<td>11:40:35 AM</td>
<td>22523</td>
<td>1</td>
<td>Diverted/misread</td>
<td>Manual Scan</td>
<td></td>
</tr>
</tbody>
</table>

| Inserter 2  | 05/11/12  | 8:12:50 AM  | 8:12:50 AM  | 21568       | 1         | Standard Processing    | Inserted          |
| REPRINTS    | 05/11/12  | 8:28:07 AM  | 8:28:10 AM  | 22517       | 2         | Standard Processing    | Inserted          |
| Operator Sue| 05/11/12  | 8:29:30 AM  | 8:29:35 AM  | 22519       | 22521     | 3       | Standard Processing    | Inserted          |

**TOTALS**

- Machine Inserted: 26604
- Sent to Reprints: 582
- Reprints Recovered: 582
- Records Accounted for: 27186
- Duplicates: 16
- Duplicates Verified: 16
- Records Less Duplicates: 27170

- Reported Output: 27170
- Variance: 0
The Summary Report must include the following; Reprints must also have all of the same information:

1. Job Name/Print Order
2. Piece Quantity
3. Sequence number range (Start and End Range)
4. Start date and time
5. End date and time
6. Total Processed Pieces
7. Total Reprints
8. Total Pieces Inserted
9. Total Variances
10. Job Complete or Incomplete

<table>
<thead>
<tr>
<th>Summary Report</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Job Information</strong></td>
</tr>
<tr>
<td>Job Name: XYZ Notice</td>
</tr>
<tr>
<td>PO #: 54001</td>
</tr>
<tr>
<td>Piece Quantity: 35862</td>
</tr>
<tr>
<td>Job Status: Completed</td>
</tr>
<tr>
<td>Date Created: 05/10/12 10:29:54</td>
</tr>
<tr>
<td>Date Completed: 05/11/12 14:22:34</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Statistical Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td>35537 Processed Pieces - Completed 05/10/12</td>
</tr>
<tr>
<td>325 Processed Reprints - Completed 05/11/12</td>
</tr>
<tr>
<td>35862 Total Pieces Inserted - Completed 05/11/12</td>
</tr>
<tr>
<td>0 Variances - Job Complete</td>
</tr>
</tbody>
</table>
### Mail Run Data File (MRDF)
**Or Item Level Accountability File**

<table>
<thead>
<tr>
<th>Record Descriptions</th>
<th>Position</th>
<th>Length</th>
</tr>
</thead>
<tbody>
<tr>
<td>Job ID</td>
<td>1 – 5</td>
<td>5</td>
</tr>
<tr>
<td>Piece ID</td>
<td>6 – 11</td>
<td>6</td>
</tr>
<tr>
<td>Total Pages</td>
<td>12 – 13</td>
<td>2</td>
</tr>
<tr>
<td>Select Feeder 2</td>
<td>14</td>
<td>1</td>
</tr>
<tr>
<td>Select Feeder 3</td>
<td>15</td>
<td>1</td>
</tr>
<tr>
<td>Select Feeder 4</td>
<td>16</td>
<td>1</td>
</tr>
<tr>
<td>Select Feeder 5</td>
<td>17</td>
<td>1</td>
</tr>
<tr>
<td>Select Feeder 6</td>
<td>18</td>
<td>1</td>
</tr>
<tr>
<td>Select Feeder 7</td>
<td>19</td>
<td>1</td>
</tr>
<tr>
<td>Select Feeder 8</td>
<td>20</td>
<td>1</td>
</tr>
<tr>
<td>Select Feeder 9</td>
<td>21</td>
<td>1</td>
</tr>
<tr>
<td>Select Feeder 10</td>
<td>22</td>
<td>1</td>
</tr>
<tr>
<td>Vertical Stacker 1</td>
<td>23</td>
<td>1</td>
</tr>
<tr>
<td>Vertical Stacker 2</td>
<td>24</td>
<td>1</td>
</tr>
<tr>
<td>Vertical Stacker 3</td>
<td>25</td>
<td>1</td>
</tr>
<tr>
<td>Vertical Stacker 4</td>
<td>26</td>
<td>1</td>
</tr>
<tr>
<td>Sealer</td>
<td>27</td>
<td>1</td>
</tr>
<tr>
<td>Meter 1</td>
<td>28</td>
<td>1</td>
</tr>
<tr>
<td>Meter 2</td>
<td>29</td>
<td>1</td>
</tr>
<tr>
<td>Customer Name</td>
<td>30</td>
<td>40</td>
</tr>
<tr>
<td>Address Line 1</td>
<td>70</td>
<td>40</td>
</tr>
<tr>
<td>Address Line 2</td>
<td>110</td>
<td>40</td>
</tr>
<tr>
<td>Address Line 3</td>
<td>150</td>
<td>40</td>
</tr>
<tr>
<td>Address Line 4</td>
<td>190</td>
<td>40</td>
</tr>
<tr>
<td>Address Line 5</td>
<td>230</td>
<td>40</td>
</tr>
<tr>
<td>Address Line 6</td>
<td>270</td>
<td>40</td>
</tr>
<tr>
<td>Zip Code</td>
<td>310</td>
<td>5</td>
</tr>
<tr>
<td>+4</td>
<td>315</td>
<td>4</td>
</tr>
<tr>
<td>+2</td>
<td>319</td>
<td>2</td>
</tr>
<tr>
<td>Return Name</td>
<td>321</td>
<td>40</td>
</tr>
<tr>
<td>Address Line 1</td>
<td>361</td>
<td>40</td>
</tr>
<tr>
<td>Address Line 2</td>
<td>401</td>
<td>40</td>
</tr>
<tr>
<td>Address Line 3</td>
<td>441</td>
<td>40</td>
</tr>
<tr>
<td>Address Line 4</td>
<td>481</td>
<td>40</td>
</tr>
<tr>
<td>Account ID</td>
<td>521</td>
<td>16</td>
</tr>
<tr>
<td>Input File Name</td>
<td>537</td>
<td>44</td>
</tr>
<tr>
<td><strong>IMBC Codes</strong></td>
<td>581</td>
<td>65</td>
</tr>
<tr>
<td><strong>Service Type</strong></td>
<td>646</td>
<td>3</td>
</tr>
<tr>
<td><strong>IMBC SerialID</strong></td>
<td>649</td>
<td>9</td>
</tr>
<tr>
<td><strong>Filler</strong></td>
<td>658</td>
<td>3</td>
</tr>
<tr>
<td>User Defined</td>
<td>661</td>
<td>29</td>
</tr>
<tr>
<td>Vendor ID</td>
<td>690</td>
<td>4</td>
</tr>
<tr>
<td>Code Name</td>
<td>694</td>
<td>5</td>
</tr>
<tr>
<td>Total Documents</td>
<td>699</td>
<td>2</td>
</tr>
<tr>
<td>End</td>
<td>701</td>
<td>1</td>
</tr>
</tbody>
</table>

**NOTE:** There is one record for each mail packet.