Program No. 817-S Term January 7, 2013 To March 31, 2014

Title: CIPA Notices

			Allison Payment Systems		**Data Intergraters**		**Lee Distributing Services**		**NPC, INC.**		**Pinnacle Data System**	
		BASIS OF	Indianapolis,IN		Fredericksburg,VA		Dallas,TX		Claysburg,PA		Norcross,GA	
ITEM NO	DESCRIPTION	AWARD	UNIT RATE	**COST**	UNIT RATE	**COST**	UNIT RATE	**COST**	UNIT RATE	**COST**	UNIT RATE	**COST**
I.	**PROCESSING/FORMATTING FIES:**											
(a)	Processing/Formating Files……..per notice workload	1	500.00	**500.00**	no charge	**0.00**	500.00	**500.00**	50.00	**50.00**	5,000.00	**5,000.00**
II.	**COMPOSTION:**											
(a)	Envelopes……..per envelope…..	3	250.00	**750.00**	no charge	**0.00**	225.00	**675.00**	50.00	**150.00**	no charge	**0.00**
III.	**PREPRODUCTION TESTS:**											
(a)	Wire Transmission Test……..per test…	1	500.00	**500.00**	1,000.00	**1,000.00**	250.00	**250.00**	no charge	**0.00**	no charge	**0.00**
(b)	Preproduction Validation Test……per test...	1	500.00	**500.00**	6,000.00	**6,000.00**	9,700.00	**9,700.00**	no charge	**0.00**	2,500.00	**2,500.00**
(c)	Systems Change/New Notice Files Validation Test....per test	1	500.00	**500.00**	1,000.00	**1,000.00**	400.00	**400.00**	100.00	**100.00**	2,500.00	**2,500.00**
IV.	**PRINTING/IMAGING & BINDING/CONSTRUCTION:**											
(a)	*Daily makeready/setup charge…….	250	25.00	**6,250.00**	no charge	**0.00**	345.00	**86,250.00**	150.00	**37,500.00**	no charge	**0.00**
(b)	Notice: Printing/imageing in black ink,including binding …….											
	……..per 1,000 leaves	40288	11.10	**447,196.80**	13.00	**523,744.00**	16.00	**644,608.00**	14.70	**592,233.60**	12.00	**483,456.00**
(c)	Mail-out Envelop (6-1/8x9-1/2"),including construction……											
	……..per 1,000 leaves	6,750	no charge	**0.00**	11.31	**76,342.50**	8.48	**57,240.00**	9.25	**62,437.50**	no charge	**0.00**
(d)	Mail-out Envelop (9X12"),including construction……											
	……..per 1,000 leaves	750	no charge	**0.00**	18.00	**13,500.00**	22.42	**16,815.00**	20.25	**15,187.50**	no charge	**0.00**
(e)	Business Reply Envelope, including construction……											
	……..per 1,000 leaves	2,000	no charge	**0.00**	10.31	**20,620.00**	8.25	**16,500.00**	8.45	**16,900.00**	no charge	**0.00**
V.	**PAPER:**											
(a)	Notice: White Offset Book (50-lb.)……	40288	7.30	**294,102.40**	6.50	**261,872.00**	9.62	**387,570.56**	6.00	**241,728.00**	6.40	**257,843.20**
(b)	Mail-out Envelope (6-1/8x9-1/2"):											
	White Wove (24-lb.),or,at contractor's option,											
	White Offset Book (60-lb.)……	6750	22.50	**151,875.00**	9.12	**61,560.00**	12.71	**85,792.50**	11.30	**76,275.00**	22.00	**148,500.00**
(c)	Mail-out Envelope (9x12"):											
	White Wove (24-lb.),or,at contractor's option,											
	White Offset Book (60-lb.)……	750	54.10	**40,575.00**	7.00	**5,250.00**	33.64	**25,230.00**	24.74	**18,555.00**	51.00	**38,250.00**
(d)	Business Reply Envelope:Goldenrod stock(24-lb.)……	2000	27.30	**54,600.00**	12.12	**24,240.00**	12.38	**24,760.00**	10.32	**20,640.00**	14.90	**29,800.00**
VI.	**INSERTING,PACKING, AND MAILING:**											
(a)	Mailer (6-1/8x 9-1/2")……..per 1,000 mailers..	6750	24.90	**168,075.00**	14.00	**94,500.00**	48.50	**327,375.00**	56.00	**378,000.00**	12.00	**81,000.00**
(b)	Mailer (9x12")……..per 1,000 mailers..	750	62.30	**46,725.00**	26.00	**19,500.00**	136.00	**102,000.00**	165.00	**123,750.00**	35.00	**26,250.00**
	CONTRACTOR TOTALS			**$1,212,149.20**		**$1,109,128.50**		**$1,785,666.06**		**$1,583,506.60**		**$1,075,099.20**
	DISCOUNT		0.00%	**$0.00**	2.00%	**$22,182.57**	0.00%	**$0.00**	0.25%	**$3,958.77**	1.00%	**$10,750.99**
	DISCOUNTED TOTALS			**$1,212,149.20**		**$1,086,945.93**		**$1,785,666.06**		**$1,579,547.83**		**$1,064,348.21**
												AWARDED

Program No. 817-S Term January 7, 2013 To March 31, 2014

Title: CIPA Notices

			Post Masters		SourceLink Ohio	
		BASIS OF	Indianapolis,IN		Dayton,OH	
ITEM NO	DESCRIPTION	AWARD	UNIT RATE	**COST**	UNIT RATE	**COST**
I.	**PROCESSING/FORMATTING FIES:**					
(a)	Processing/Formating Files……...per notice workload	1	no charge	**0.00**	75.00	**75.00**
II.	**COMPOSTION:**					
(a)	Envelopes……per envelope…..	3	no charge	**0.00**	75.00	**225.00**
III.	**PREPRODUCTION TESTS:**					
(a)	Wire Transmission Test……..per test…	1	750.00	**750.00**	no charge	**0.00**
(b)	Preproduction Validation Test……..per test...	1	750.00	**750.00**	250.00	**250.00**
(c)	Systems Change/New Notice Files Validation Test....per test	1	750.00	**750.00**	no charge	**0.00**
IV.	**PRINTING/IMAGING & BINDING/CONSTRUCTION:**					
(a)	*Daily makeready/setup charge……..	250	45.00	**11,250.00**	250.00	**62,500.00**
(b)	Notice: Printing/imageing in black ink,including binding …….					
	……..per 1,000 leaves	40288	17.00	**684,896.00**	13.00	**523,744.00**
(c)	Mail-out Envelop (6-1/8x9-1/2"),including construction……					
	……..per 1,000 leaves	6,750	no charge	**0.00**	10.28	**69,390.00**
(d)	Mail-out Envelop (9X12"),including construction……					
	……..per 1,000 leaves	750	no charge	**0.00**	11.41	**8,557.50**
(e)	Business Reply Envelope, including construction……					
	……..per 1,000 leaves	2,000	no charge	**0.00**	9.32	**18,640.00**
V.	**PAPER:**					
(a)	Notice: White Offset Book (50-lb.)……	40288	5.75	**231,656.00**	6.90	**277,987.20**
(b)	Mail-out Envelope (6-1/8x9-1/2"):					
	White Wove (24-lb.),or,at contractor's option,					
	White Offset Book (60-lb.)……	6750	25.00	**168,750.00**	14.88	**100,440.00**
(c)	Mail-out Envelope (9x12"):					
	White Wove (24-lb.),or,at contractor's option,					
	White Offset Book (60-lb.)……	750	55.00	**41,250.00**	20.29	**15,217.50**
(d)	Business Reply Envelope:Goldenrod stock(24-lb.)……	2000	28.00	**56,000.00**	14.00	**28,000.00**
VI.	**INSERTING,PACKING, AND MAILING:**					
(a)	Mailer (6-1/8x 9-1/2")……per 1,000 mailers..	6750	25.00	**168,750.00**	21.00	**141,750.00**
(b)	Mailer (9x12")……per 1,000 mailers..	750	95.00	**71,250.00**	43.90	**32,925.00**
	CONTRACTOR TOTALS			**$1,436,052.00**		**$1,279,701.20**
	DISCOUNT		0.00%	**$0.00**	0.00%	**$0.00**
	DISCOUNTED TOTALS			**$1,436,052.00**		**$1,279,701.20**

U.S. GOVERNMENT PRINTING OFFICE

Washington, DC

GENERAL TERMS, CONDITIONS, AND SPECIFICATIONS

For the Procurement of

CIPA Notices

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

Social Security Administration (SSA)

Single Award

TERM OF CONTRACT: The base term of this contract is for approximately 16 months beginning Date of Award and ending March 31, 2014, plus up to four (4) 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.

NOTE: 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 (or from date of installation of up to a T-1 line) through March 31, 2013; actual production begins April 1, 2013.

BID OPENING: Bids shall be publicly opened at 11:00 a.m., prevailing Washington, DC time, on **November 20, 2012.**

BID SUBMISSION: Submit bid in pre-addressed envelope furnished with solicitation or send to: U.S. Government Printing Office, Bid Section, Room C-161, STOP: PPSB, 36 H 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.

THIS IS A NEW PROGRAM. THERE IS NO ABSTRACT AVAILABLE.

For information of a technical nature call Linda Rodano at (202) 512-0310 (No collect calls), or email at lrodano@gpo.gov.

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)).

GPO Contract Terms (GPO Publication 310.2) – http://www.gpo.gov/pdfs/vendors/sfas/terms.pdf.

GPO QATAP (GPO Publication 310.1) – http://www.gpo.gov/pdfs/vendors/sfas/qatap.pdf.

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 functions are the printing of notices, the laser printing of data for the notices from electronically transmitted files, folding, and inserting. Any bidder who cannot perform the predominant production functions of this contract will be declared non-responsible. Contractor may subcontract the printing and manufacturing of the envelopes, and the presorting and mailing of the completed product.

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

If the contractor needs 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 subcontractor is not approved by the Government, then the contractor must submit new subcontractor's information to the Government for approval 30 calendar days prior to the start of production at that facility.

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

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 1/4 of 1% when run through a USPS OCR Scanner.

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

Attribute	Specified Standard
P-7. Type Quality and Uniformity	O.K. Press Sheets

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:

P-7. Average type dimension, electronic media, camera copy, negatives, manuscript copy.

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 Date of Award to March 31, 2014, 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 three (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, 2012,** 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 0913-01 for *Offset and Text* will apply to all paper required under this contract.

2. The applicable index figures for the month of **November 2012**, 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 line items V. (a) through (d) 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 Social Security Administration 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 postaward conference between the Contracting Officer and the responsible contractor representative.

(b) The contractor shall 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 shall 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 Form SSA-301, "Contractor Personnel Security Certification" (see Exhibit A).

A copy of this signed certification must be forwarded to: SSA, Printing Management Branch, Attn: Kenneth Wetzelberger, 1352 Annex Building, 6401 Security Boulevard, Baltimore, MD 21235-6401. A copy must also be forwarded to: U.S. Government Printing Office, Attn.: AST 4, STOP: CSAPS, Room C838, 732 North Capitol Street, NW, Washington, DC 20401.

(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 presorting and/or mailing of the notices of this contract, the subcontractor must conform to all security requirements of the contract.

SECURITY WARNING: It is the contractor's responsibility to properly safeguard personally identifiable information (PII) from loss, theft, or inadvertent disclosure and to immediately notify the Government of any loss of personally identifiable information. Personally identifiable information 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.
- Are prohibited from having any mobile devices or cameras in sensitive areas that contain confidential materials, including 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 that employee screening for sensitive positions within their department has occurred prior to any individual being authorized access to sensitive or critical applications.
- Implement, maintain, and enforce the security standards and procedures as they appear in this contract and as outlined by the contractor.
- Contact the security officer within 24 hours whenever a systems security violation is discovered or suspected.

Applicability –

The responsibility to protect personally identifiable information applies during the entire term of this contract and all option year terms if exercised. All contractors must secure and retain written acknowledgement from their employees stating they understand these policy provisions and their duty to safeguard personally identifiable information. 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 confidential material, 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 personally identifiable information 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 personally identifiable information 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 personally identifiable information and, due to the employee's failure to exercise due care, the information is lost, stolen or inadvertently released.

Whenever the contractor's employee has doubts about a specific situation involving their responsibilities for safeguarding personally identifiable information, they should consult the Contracting Officer or the Contract Administrator.

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 as detailed in Exhibit B, "Security and Suitability Requirements."

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

Upon award, the contractor must provide to SSA an applicant listing of all individuals for whom the contractor is requesting a suitability determination (i.e., background investigation). This listing should include the following:

- the contractor's name
- the contract number
- the contractor's point of contact (CPOC) name
- the CPOC's contact information including email address
- each applicant's full name
- each applicant's Social Security Number (SSN)
- each applicant's date of birth
- each applicant's place of birth (must show city and state if born in the United States (U.S.) OR city and country if born outside of the U.S.)

The contractor should submit the applicant listing upon contract award. The background investigation process will

not start until the applicant listing is submitted.
The applicant listing must be faxed to the CPSPM Suitability Team at (410) 966-0640 or sent via U.S. Mail to: SSA, CPSPM Suitability Team, Room 1260 Dunleavy Building, 6401 Security Boulevard, Baltimore, MD 21235.

Once SSA receives and reviews the applicant listing, SSA will initiate the Electronic Questionnaire for Investigations Process (eQIP). SSA will email notification to the CPOC that each applicant has been invited into the eQIP website to electronically complete their background investigation form. The CPOC will provide the website to the applicants to complete their eQIP form. The applicant will have up to seven (7) calendar days to complete the eQIP form. The 7-workday timeframe begins once SSA notifies the CPOC of the eQIP invitation(s). The applicant must print the signature pages of the form (pages 7 through 9 of SF 85P), (Sample Form SF85P, Exhibit C), sign the signature pages, and provide the signed originals to the CPOC.

The following is a list of forms each contractor employee is responsible to for completing:

- Original signed and dated eQIP signature pages (pages 7 through 9 of SF 85P) as specified in the above paragraph.
- Two (2) "Fingerprint Cards" (FD-258, Exhibit D) (NOTE: The contractor will absorb the costs for obtaining fingerprints).
- One (1) "Declaration for Federal Employment" (Optional Form 306, Exhibit E).
- One (1) "Fair Credit Reporting Act Authorization Form" (Exhibit F).
- 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. For new contract employees hired during the contract term, forms must be submitted at least 15 workdays prior to working under the contract. The 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. It is the responsibility of the contractor to ensure fingerprint cards are processed through their local police departments or other authorized finger printers. SSA must receive forms within 30 calendar days of signature and date. SSA will return forms not fully completed back to the contractor. Forms may be obtained by calling SSA Personnel Security Suitability Program Officer (SPO) Leslie Herman at (410) 965-4426 or Joan DeAngelis at (410) 965-6845.

The CPOC shall submit one (1) cover sheet to SSA 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 SSN, each applicant's date of birth, and each applicant's place of birth. Submit this cover sheet along with the completed paper forms and two FD-258 fingerprint charts for each applicant to: SSA, CPSPM Suitability Team, Room 1260 Dunleavy Building, 6401 Security Boulevard, Baltimore, MD 21235.

SSA will send a pre-screening notification within 15 workdays of receipt of properly completed forms and fingerprinting cards. Once a contractor employee is approved to work via the pre-screen notification, they are permitted to perform work under the contract. A final suitability determination can take up to 45 workdays.

PREAWARD SURVEY: In order to determine the responsibility of the prime contractor or any subcontractor, the Government reserves the right to conduct an on-site pre-award survey of all of the contractor's computer, printing, and 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.

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 and 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 April 1, 2013.

NOTE: Due to PII issues, the Government cannot award the contract until all security requirements are met. If the contractor fails to meet these requirements within 60 workdays of start of live production, the contractor will be declared nonresponsive.

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 following activities. 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 locations for a period longer than five (5) workdays, contractor must have a backup facility with the capability of producing the notices.

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, and a timetable for the start of production at that facility.

Part of the plan must also include the transportation of Government materials from one facility to another. SSA has the option to install a T-1 line into the backup facility.

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

Quality Control Plan – The contractor shall provide and maintain, within their own organization, an independent quality assurance organization of sufficient size and expertise to 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 specified herein are met. The contractor shall 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 shall 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. 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, provide for back-up and re-running in the event of an unsatisfactory sample and contain control systems that will detect defective, missing, or mutilated pieces.

The plan should include the sampling interval the contractor intends to utilize. The contractor will be required to create two quality control samples to be drawn from the production stream at the same time –

- 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 Social Security Administration and will be packed with the remaining samples associated with each print order and shipped to the Social Security Administration (address to be supplied at the postaward meeting).

The plan shall detail the actions to be taken by the contractor when defective, 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 shall monitor all aspects of the job including material handling and mail flow, to assure that 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.

The contractor must maintain quality control samples, inspection reports and records for a period of no less than 120 calendar days subsequent to the date of the check tendered for final payment by the Government Printing Office. 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 System 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 for electronic transmission of CIPA notice 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.

The system plan shall demonstrate the contractor's ability to provide complete hardware and software compatibility with SSA's existing network (see "*Wire Transmission Test*" for additional information). The contractor must complete a System Plan (see Exhibit H).

Included with the Computer System Plan shall 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(s) plans to use a consultant for either of these operations, a resume(s) must still be included.

Mail Plan – This plan should include sufficient detail as to how the contractor will comply with all applicable U.S. Postal Service (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 – 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 pickup/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 be given to familiarize them with the requirements of this program.

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

- list of all production equipment and equipment capacities to be utilized on this contract;
- the production capacity currently being utilized on this equipment;
- capacity that is available for these workloads; and,
- if new equipment is to be utilized, documentation of the purchase order, source, delivery schedule and installation dates are required.

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).

Production Area – The contractor must provide a secure area(s) dedicated to the processing and storage of data for the CIPA 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) shall be limited to security-trained employees involved in the production of CIPA Notices.

Part of the Security Control Plan shall include a floor plan detailing the area(s) to be used, showing existing walls, equipment to be used, and the printing and finishing locations.

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.

Disposal of Waste Materials – The contractor is required to demonstrate how all waste materials used in the production of sensitive SSA records will be definitively destroyed (ex., burning, pulping, shredding, macerating, or other suitable similar means). Electronic Records must be definitively destroyed in a manner that prevents reconstruction. *Definitively* destroying the records means the material cannot be reassembled and used in an inappropriate manner in violation of law and regulations. *Sensitive* records are records that are national security classified or exempted from disclosure by statue, including the Privacy Act or regulation.

The contractor, at a minimum, must crosscut shred all documents into squares not to exceed one-quarter inch. All documents to be cannot leave the security of the building, must be destroyed at contractor's printing site, and cannot be subcontracted. The contractor must specify the method planned to dispose of the material.

UNIQUE IDENTIFICATION NUMBER: Unique identification 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, or mutilated pieces detected are identified, reprinted and replaced. The contractor's recovery system must use the unique alpha/numeric identifiers assigned to each piece (including quality control samples) to aid in the recovery and replacement of any defective, missing, 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 U.S. Postal Service (USPS) facility. An explanation of the contractor's sequential numbering system is required to understand the audit trail required for each and 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 United States postal system.

NOTE: Contractor must have all hardware, programming, and finalized reports in place to meet this requirement arrive at least 90 calendar days prior to the start of live production on April 1, 2013. Contractor must submit a sample of their proposed Audit and Summary reports with the required Preaward 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 shall be defined as follows:

- Each notice shall 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 effected notices.
- Mailing integrity shall be defined as follows:
- All notices received from SSA for each file date were printed, inserted and entered correctly into the United States postal 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:

(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 pieces that are 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.

(e) Exit Scanning: A camera system must be mounted just aft of 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 through the use of the audit system that is independent of the inserting equipment as well as independent of the operator. 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 6-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 (e.g., inserted, diverted, and reason for divert such as missing sequence number, missing leaves, mutilated, duplicate, pulled for inspection).
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, and total completed.
10. Audit report must contain the same information for all the reprints married with this report as listed above showing that all pieces for each mailer number and file date are accounted for.

(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 (See Exhibit G):

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 and date that each was completed.

NOTE: A PDF copy of the summary report(s) and matching GPO 712 form(s) must be submitted to Kenneth Wetzelberger at kenneth.wetzelberger@ssa.gov for each file date within two (2) workdays of mailing.

NOTE: Contractor must submit a sample of their Audit and Summary reports with the required Preaward Poduction Plans for approval.

Contractor must generate an automated audit report when necessary showing the tracking of all notices throughout 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 calendar 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 not less than 180 calendar days subsequent to the date of the check tendered for final payment by the Government Printing Office. 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 that the contractor produce individual pieces in transit within the plant, however, the contractor must demonstrate that they will have an audit trail established that has the ability to comply with this type of request when and if the need arises.

ON-SITE REPRESENTATIVES: One (1) or two (2) 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 one private office of not less than 150 square feet, furnished with one desk, one swivel arm chair, two telephone lines (one for a PC and one for a telephone) and one facsimile machine (the Government will supply hookups and cover the cost of the telephone/facsimile machine service), two work tables, and two four-drawer letter-size files with combination padlock and pendaflex file folders or equal.

On-site representative(s) may be stationed at the contractor's facility to: provide project coordination in receipt of wire transmissions; verify addresses; monitor the printing, imaging, folding, inserting, mail processing, quality control, sample selections, and inspections; and monitor the packing and staging of the mail.

These coordinators will not have contractual authority, and cannot make changes in the specifications or in contract terms, but will bring any and all 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.

POSTAWARD CONFERENCE: Unless waived by the Contracting Officer, the total requirements of the job as indicated in these specifications will be reviewed by Government representatives with the contractor's representatives at the Social Security Administration, Baltimore, MD, immediately after award. **NOTE:** Person(s) that the contractor deems necessary for the successful implementation of the contract must be in attendance.

PREPRODUCTION MEETING: A preproduction meeting covering the printing, imaging, folding, inserting, and mailing shall 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 Government Printing Office, Social Security Administration and the U.S. Postal Service. The contractor shall present and explain their final plan for the printing, imaging, folding, inserting, and mailing of the CIPA Notices.

The contractor shall 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.

In addition, the contractor shall be prepared to present detailed production plans, including such items as quality assurance, projected commencement dates, equipment loading, pallet needs, etc. The contractor is to provide the name of the representative responsible for the mailing operation and that individual's backup.

NOTE: Person(s) that the contractor deems necessary for the successful implementation of the contract must be in attendance.

ASSIGNMENT OF JACKETS, PURCHASE, TASK ORDERS AND PRINT ORDERS: A GPO jacket number will be assigned and a purchase order issued to the contractor to cover work performed. The purchase order will be supplemented by an individual daily electronic "Task Order" for each job placed with the contractor. A print order will be issued weekly and will indicate the total number of task orders placed and the total number of notices produced that week. The print order will also indicate any other information pertinent to the particular order.

ORDERING: Items to be furnished under the contract shall 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 March 31, 2014, plus for such additional period(s) 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 shall 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 shall 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 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 SANCTIONS: 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 an agency, 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 thereunder, 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 $10,000.00.

SECTION 2. - SPECIFICATIONS

SCOPE: These specifications cover the production of mailing packages for CIPA notices consisting of English and Spanish personalized notices, mail-out envelopes, Business Reply Envelope (BRE), and requiring such operations as the receipt and processing of wire transmitted data, re-development of Advance Function Printing Data Stream (AFPDS) resources, composition, printing and imaging, folding, inserting, metering, presorting, and mailing.

NOTE: This workload contains 2-D barcodes that must be capable of scanning into an electronic folder via fax. Due to this requirement, the contractor is required to print all notices at a minimum of 600 x 600 dpi to ensure the proper scanning of the 2-D image through fax machines.

TITLE: CIPA Notices.

FREQUENCY OF ORDERS, QUANTITY, AND NUMBER OF PAGES:

An electronic task order will be issued daily, Tuesday through Saturday.

A print order will be issued weekly and will indicate the total number of electronic task orders placed and total number of copies to be produced that week.

NOTE: A separate print order will be placed for proofs and for the wire transmission test, preproduction validation, preproduction press and mail run tests and any test files sent during the course of the contract.

The total requirement of this contract is approximately 7,500,000 notices per year. (NO SHORTAGES WILL BE ALLOWED.)

NOTE: During the term of this contract, the Government expects to develop 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. It is estimated that approximately one (1) to three (3) new notice workloads may be added during the term of this contract.

The Government reserves the right to increase or decrease by up to 25% the total number of notices ordered annually. This 25% includes the additional notices occasioned by the one (1) to three (3) new notices workloads developed during the term of this contract.

The figures show the minimum and maximum quantities required daily for the notices, number of printed pages in a notice (notices are duplex printed), and how the notice is to be folded. Exact quantities will not be known until each run is electronically transmitted to the contractor.

CIPA Notices –

DATA SET NAME: Vendor.CIPAFP.MC*****.rundate

Daily Minimum:	18,000
Daily Maximum:	45,000
Printed Pages:	2 to 90 ***printed*** pages per notice
Inserts:	Personalized English and/or Spanish Notice Mail-out envelope BRE (Variable insert)
Folding:	Bi-Fold or Flat

New Notice Workloads –

These new mailers could be English, Spanish only or bilingual Spanish/English notices. Notices will consist of 2 to 90 printed pages. All notice and envelope requirements (including the Courtesy Reply Envelope (CRE)) will match those specified herein for the CIPA notices.

DATA SET NAME*: Vendor.***AFP.M*#aaaaa.Ryymmdd

The file names/data set names for each new notice workload will be supplied to the contractor as they are developed.

Daily Minimum:	50
Daily Maximum:	25,000
Printed Pages:	2 to 90 ***printed*** pages
Inserts:	Personalized Notice
	Mail-out envelope
	BRE or CRE (Variable insert)
Folding:	Bi-Fold or Flat

NOTE: All of the data set names are not listed for each file. The "aaaaa" represents the unique job identifier that is assigned at run time. The "#" will be replaced with 1 through 8 for each of the Program Service Centers, if applicable.

The data set names listed above (and throughout these specifications) may not be the final data set names transmitted to the contractor. Final data set names for CIPA notices will be supplied to the contractor at the postaward conference, or shortly thereafter.

TRIM SIZES:

Personalized Notices: 8-1/2 x 11" flat size. (Some notices will fold down to 8-1/2 x 5-1/2".)

Mail-out Envelopes: 6-1/8 x 9-1/2" or 9 x 12" windowed envelopes, plus flap.

NOTE: Notices that range from 1 to 10 leaves must be inserted into a 6-1/8 x 9-1/2" envelope. Notices that exceed 10 leaves must be inserted into a 9 x 12" envelope.

Business Reply Envelope: 5-3/4 x 8-3/4" windowed envelope, plus 1-1/2" flap.

USEAGE:

CIPA MAIL-OUT ENVELOPES:	90-CALENDAR DAY VOLUMES
6-1/8 x 9-1/2"	1,687,500
9 x 12"	187,500

CIPA BUSINESS REPLY ENVELOPES:	90-CALENDAR DAY VOLUMES
5-3/4 x 8-3/4"	500,000

*This BRE window envelope will be inserted in variable mailers.

GOVERNMENT TO FURNISH:

Electronic files will be furnished for the notices (see "*Electronic Files"* below).

Manuscript copy for one (1) mail-out envelope and one (1) BRE envelopes.

At the Government's option, camera copy, negatives, or electronic files (PostScript format) for the recycled paper logo and legend, may be furnished for the envelopes.

PS Form 3615 (Mailing Permit Application and Customer Profile).

GPO Form 712 (Certificate of Conformance).

Official Postage Meters

Exhibit A: Form SSA-301, Contractor Personnel Security Certification.

Exhibit B: Security and Suitability Requirements.

Exhibit C: Questionnaire for Public Trust Positions (Standard Form 85P).

Exhibit D: Sample of Fingerprint Card.

Exhibit E: Declaration for Federal Employment (Optional Form 306).

Exhibit F: Fair Credit Reporting Act Authorization Form.

Exhibit G: 100% Accountability and Summary Report.

Exhibit H: System Plan.

Exhibit I: Key SSA and GPO Personnel Contact Information.

Exhibit J: Database/Spreadsheet for Postal Documentation.

Exhibit K: Mail Run Data File.

Electronic Files –

The Government will furnish test files that are to be used in performing the preproduction press and mail run test.

All files provided by the Government or duplicates made by the contractor and any resultant printouts must be kept accountable and under strict security to prevent their release to any unauthorized persons. Files may not be duplicated in whole or part for any other purpose than to create material to be used in the performance of this contract. All duplicate files or resultant printouts shall be destroyed by the contractor.

NOTE: Files provided to the contractor must be retained for 21 workdays after mailing (before destruction).

The contractor will receive three (3) files for each CIPA print file: full composed Advanced Function Presentation Data Stream (AFPDS) file, the Mail Run Data file, and the Banner (BNR) file.

SSA uses the Image Object Content Architecture (IOCA) capabilities of Advanced Function Presentation (AFP) to prepare the notices and files that are formatted in a Fully Composed AFPDS format for duplex printing. For proper processing, AFPDS resources are supplied to the contractor by SSA and used for printing notices in AFPDS format. The contractor must have software or an operating system which is 100% compliant with the most recent release of the IBM z/OS operating system accompanied by the most recent release of IBM Print Services Facility (PSF).

NOTE: File is provided as a 1-up stream roll-in to roll-out with the file order reversed for insertion. Contractor must complete programming to print either as a roll or cut sheet product. The predominant data file format is AFP IOCA full page images; however, any valid AFP format is possible and must be printable at the contractor's location. Each piece of mail will be assigned a unique alpha/numeric identifier for tracking, insertion, location and recovery processes.

A second file known as the Mail Run Data file will contain all information relevant to each mail piece (see Exhibit K). This file will include the number of sheets of paper, insertion bin selection, recipient's address, return address, Zip+4+2, outsort for manual handling, etc.

The third file, known as the Banner file, contains information for setting up the intelligent inserters, such as file totals, number of mailers, and bin setup for those items being included in the mailers and the total required in each bin.

All files will be electronically transmitted to the contractor. 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.

All files transmitted by SSA will be physical sequential. Any alteration of the notice content in the file is not permitted.

Notice Pulls – Due to the sensitivity of notices in this contract, the Government may request that the contractor remove individual notices from the production stream. When this occurs, the Government will supply the contractor with a list of Notices to be pulled. The list will contain the notice ID that appears in the MRD file to identify the notices. 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 has been produced, the contractor must be capable of identifying the notice and pulling it from the production floor.

NOTE: Whenever the contractor makes a change in the programming, the contractor is required to execute a self-certification statement specifying the date of the last programming change. Prior notification of a programming change is required in addition to the self-certification statement for the contractor to schedule a validation test with SSA.

A record will be transmitted for each mailing address, Mail Run Data File. The records 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.

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.

All data provided by the Government or duplicates made by the contractor 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.

Any duplicate data and any resultant printouts must be destroyed by the contractor.

<u>Dataset Names for the following items will be provided at the Postaward Conference:</u>

Print Resource Library (AFPDS) for Wire Transmission or Email:

AFPDS resources including page and form definitions, fonts, page segments and overlays (if applicable) for page formatting.

Preproduction Press and Mail Run Test Files for Wire Transmission:

An AFPDS formatted print file with the corresponding Mail Run Data File and Banner file will be supplied for workload in the quantities required.

Revised Resource Library (AFPDS) for Wire Transmission or Email (when applicable):

AFPDS print resources, overlays, page segments and non-standard fonts provided shortly after the postaward conference may change during the term of the contract, in which case a revised AFPDS resource file(s) will be electronically transmitted to the contractor as a replacement(s).

The contractor is cautioned that there may be a signature change(s) during the term of this contract. If this occurs, SSA will provide the contractor with a new AFPDS resource file.

PRINTER RESOURCES (AFPDS): The test files are to be used in the Preproduction Press and Mail Run Test (see "*Preproduction Press and Mail Run Test*".)

SSA will provide the AFPDS resources for notice workload. These resources will be provided to the contractor via wire transmission or email shortly after the postaward conference. SSA will also provide test files for wire transmission with samples of each workload to enable the start of the validation process.

These compliances relate solely to interpreting and printing files to be provided to the contractor by SSA, to ensure that 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 re-develop/re-program the AFPDS resources and MRD file to ensure proper printing and inserting in their environment.

NOTE: The AFPDS file contains all AFP resources, except licensed fonts, required to print this file. SSA will supply any customized fonts. It is the contractor's responsibility to provide licensed copies of all other fonts necessary for printing.

The contractor will be responsible for maintaining the AFPDS resources on each system that processes SSA's notices. SSA will provide updated resources electronically, as necessary.

CONTRACTOR TO FURNISH: All materials and operations, other than those listed under "GOVERNMENT TO FURNISH," necessary to produce the product(s) in accordance with these specifications.

CASS Certificate.

Contractor must have programmer(s) capable of handling AFPDS resources.

FOR QUALITY CONTROL AND AUDITING PURPOSES – The contractor must not merge file dates and mailers from different print orders during processing, printing and mailing.

FILE TRANSFER MANAGEMENT SYSTEM REQUIREMENTS: The contractor shall provide the capability to interface with SSA's National FTMS for electronic transmission of designated 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.

SSA utilizes, and the contractor must provide compatibility with, Managed File Transfer (formerly known as Cyberfusion Integration Suite) software from TIBCO product. The contractor may implement the Cyberfusion 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 hinders automated file transmission.

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. 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.

Wire transmission of production files shall be the standard, automated technique. In the event that the transmission network is unavailable for a time period deemed critical by the Government, the files may (at the Government's option) be processed at the SSA print/mail facility.

The contractor's FTMS software shall be operational for the receipt of data files 24 hours a day, seven (7) days a 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.

It is the contractor's responsibility to notify SSA when systems or connection problems arise and transmission cannot take place. SSA's first point of contact for systems or connectivity problems shall be the HELP DESK at (877) 697-4889.

NOTE*: the contractor must not compress files in processing data for this contract. It is solely the contractor's responsibility to redevelop/reprogram the AFPDS resources and mail run data to ensure proper printing and inserting in their environment.*

WIRE TRANSMISSION TEST, PREPRODUCTION VALIDATION TEST, PREPRODUCTION PRESS AND MAIL RUN TEST, AND VALIDATION TEST: Prior to the commencement of production of orders placed under this contract, the contractor will be required to demonstrate their ability to perform to the contract requirements. The Government will furnish electronic test files at the postaward conference, or shortly thereafter, to be used in performing a Preproduction Validation and Preproduction Press and Mail Run Test for CIPA notices.

NOTE: Failure of the contractor to perform any of the following tests (i.e., Wire Transmission Test, Preproduction Validation Test, Preproduction Press and Mail Run Test, or Validation Test) to the satisfaction of the Government may be cause for default. The Government reserves the right to waive the requirements of any of these tests. The contractor will be notified at the postaward conference if any test(s) will be waived.

The contractor will be required to perform the following tests:

Wire Transmission Test: The contractor will be required to receive within one (1) workday approximately 45,000 notices ranging from 2 to 90 printed pages. The contractor will be required to perform a Record Count Verification the same day the complete transmission of the test files are received. The contractor will be required to copy the files to their own system and provide to the SSA, Printing Management Branch, Baltimore, MD, (as specified on the print order - see Exhibit I) with the exact counts received (broken down by data set name), before proceeding with any other processing. SSA will respond within one (1) workday of receipt thereof.

Preproduction Validation Test: Within five (5) workdays of receipt of test files, the contractor shall conduct a validation test and furnish no less than 100 samples of the completed product. Notices must be complete and include all variable data from Government furnished files, inserted into envelopes. Seal envelopes. Submit samples to: SSA, Printing Management Branch, Baltimore, MD, (as specified on the print order - see Exhibit I).

The Government will approve, conditionally approve, or disapprove the preproduction validation test output within five (5) 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 of notices (as indicated above) will be required until such time as the validation produces no errors. A test file will be provided on a yearly basis prior to actual production.

***Preproduction Press and Mail Run Test*:** Prior to commencement of production of the contract, the contractor will be required to perform a 12-hour preproduction press and mail run test.

The contractor will be issued a print order for the 12-hour test. Upon successful completion of all test requirements, the contractor will be reimbursed for all applicable costs, in accordance with the contractor's submitted bid prices in the "SCHEDULE OF PRICES." If the contractor fails to meet all test requirements, they will not be reimbursed for any associated costs.

In order to complete this test, the contractor is to use the files provided from the aforementioned wire transmission test

NOTE: The contractor will be required to have all composition, proofing, envelopes, scanning equipment and reports for 100% accountability of production and mailing, completed, available, and ready for production prior to beginning the test. Notices are to be completed in accordance with contract requirements, inserted into envelopes and prepared for mailing. Contractor will be required to provide the necessary audit and summary reports for 100% accountability of production and mailing, immediately after the run is completed.

The contractor must produce **25,000** notices, using the first 25,000 notices from the wire transmission test, in a continuous 12-hour period that will prove to the Government representatives that the contractor can satisfactorily complete the requirements of this contract during live production.

The 12-hour period for the printing process will begin when an "O.K. TO PRINT" is given by the Government representative on-site. The 12-hour period for the inserting and mailing process will begin within two (2) hours after the start of the printing to allow the contractor to print sufficient materials to begin the inserting process. See "SCHEDULE" for the Preproduction Press and Mail Run Test.

The test run will incorporate all aspects of the program consisting of the processing of the electronically transmitted test files; the duplex printing and imaging of notices; gathering; folding; inserting; manifesting; presorting; and preparing finished notices for delivery to the USPS. To simulate actual production conditions, the product to be produced must be in accordance with all contract specifications and all USPS regulations.

The contractor must perform the preproduction press and mail run test on their equipment and using their personnel. The test must be performed on the printing equipment, inserting machines with required scanning equipment that will be used in live production. 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 validation output within seven (7) 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.

Failure to meet the requirements of the 12-hour test is grounds to immediately terminate the contractor for default.

Systems Change/Signature Change Validation Test(s): When required, the Government will furnish test files for wire transmission that are to be used in performing a Systems Change/Signature Change Validation Test. This test is required whenever SSA initiates a systems/programming change or there is a signature change. The contractor shall furnish up to 50 printed/imaged samples (no envelopes). Contractor must submit notice samples within seven (7) workdays of receipt of test files. The Government will approve, conditionally approve, or disapprove the samples from the Systems Change/Signature Change Validation Test within five (5) workdays of receipt thereof.

NOTE: The test shall occur without a break in production of notices. The Government will inform the contractor in advance when test files are to be provided and what changes are taking place. When Preproduction Validation and/or Validation tests are required the Government shall include them on a print order. For each test the contractor is allowed to charge for one makeready and bill notices produced as outlined in the "SCHEDULE OF PRICES."

COMPOSITION:

Contractor will be required to set type for the three (3) required envelopes. Type to be set using Helvetica or similar typeface.

Century Schoolbook, Sonoran Serif, or equivalent fonts are to be used for producing the notices.

Social Security Administration will provide the required font numbers. The contractor will be required to validate that they have the proper licenses for each. No alternate typefaces will be allowed; however, manufacturers' generic equivalents may be accepted (upon Government approval) for the above typefaces.

Font for Intelligent Mail Barcode is required.

PROOFS: Proofs will be required with the initial order and any time that a copy change may be required during the term of the contract.

All Envelopes – Three (3) sets of digital color content proofs each for each mail-out envelope and the BRE. Proofs must be created using the same Raster Image Processor (RIP) that will be used to produce the product. Proofs shall have all elements in proper position (not pasted up), with margins (including crop marks) indicated.

The Government may require one (1) or more sets of revised proofs before rendering an "O.K. 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; such operations must be accomplished within the original production schedule allotted in the specifications.

The contractor must not print prior to receipt of an "O.K. TO PRINT."

STOCK/PAPER: The specifications of all paper furnished must be in accordance with those listed herein or listed for the corresponding JCP Code numbers in the "Government Paper Specification Standards No. 12" dated March 2011.

Government Paper Specification Standards No. 12 – http://www.gpo.gov/pdfs/customers/sfas/vol12/vol_12.pdf.

All paper used in each copy must be of a uniform shade.

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

Mail-out Envelopes – White Writing Envelope, basis weight: 24 lbs. per 500 sheets, 17 x 22", equal to JCP Code V20; or at contractor's option, White Offset Book, basis weight: 60 lbs. per 500 sheets, 25 x 38", equal to JCP Code A60 with exception: bursting strength 24 lb/in^2.

Business Reply Envelopes – Any goldenrod stock, basis weight: 24 lbs. per 500 sheets, 17 x 22", bursting strength 24 lb/in^2.

PRINTING/IMAGING:

NOTE*:* The Government reserves the right to make changes to the envelopes 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 should not preprint or maintain more than a 90-day surplus/inventory of any of the envelopes required on this contract. The Government shall 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 change is implemented.

Contractor will be required to convert furnished data from electronic transmission for laser printing. All printing/imaging of notices shall have a minimum resolution of 600 x 600 dpi.

Notices – Print notices duplex (face and back, head-to-head) in black ink only.

Mail-out and BRE Envelopes – Print face and back (after manufacture) in black ink only. Printing shall be in accordance with the requirements for the style envelope ordered. All printing shall comply with all applicable U.S. Postal Service regulations. The envelope shall accept printing without feathering or penetrating to the reverse side.

All envelopes require a security tint 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.

RECYCLED PAPER LOGO AND LEGEND: The recycled paper logo and legend must be printed in black ink on both mail-out envelopes and the BRE on the back (after manufacture) in the bottom left-hand corner.

PRESS SHEET INSPECTION: Final make-ready press sheets may be inspected and approved at the contractor'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 those standards throughout the press run (within QATAP tolerances when applicable) and with discarding all make-ready sheets that preceded approval. When a press sheet inspection is required, it will be specified on the individual print order. See GPO Publication 315.3 (Guidelines for Contractors Holding Press Sheet Inspections) issued June 2003. 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.

Press sheets must contain control bars for each color of ink on the sheet. Control bars must be placed parallel to the press's ink rollers. The control bars (such as BRUNNER, GATF, GRETAG, or RIT) must show areas consisting of 1/8 x 1/8" minimum 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 across the entire press sheet.

MARGINS: Margins will be indicated on print order/task order, furnished copy, or furnished electronic file.

BINDING: Notice pages trim four sides.

CONSTRUCTION:

Mail-out Envelope (6-1/8 x 9-1/2") –

Envelopes are open side, with gummed fold-over flap for sealing and contain high cut diagonal seams or double side seams. Flap depth is at contractor's option, but must comply with all USPS requirements. Flap must be coated with 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 two die-cut windows: a return address window and a mailing address window. The return address window (1-1/4 x 3-1/4" in size) will have rounded corners and is located 1/2" from top edge and 3/4" from the left edge of envelope. The mailing address window (1-1/2" x 4-1/4" in size) will have rounded corners and is located 1-1/2" from the bottom edge and 3/4" from the left edge of the envelope. (The long dimension of the windows is to be parallel to the long dimension of the envelope.)

Mail-out Envelope (9 x 12") –

Envelope must be open end, 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 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 one die cut mailing address window (4-1/2 x 4" in size) with rounded corners and is located 1/2" from left edge and 5/8" from bottom edge of envelope. (Vertical placement – the long dimension of the window is to be parallel to the long dimension of the envelope.)

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

Business Reply Envelope (5-3/4 x 8-3/4") –

Envelopes are open side, with gummed fold-over flap for sealing and contain high cut diagonal seams or double side seams. Flap depth is at contractor's option, but must comply with all USPS requirements. Flap must be coated with 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 single die-cut window (approximately 1-5/8" x 3-5/8" in size) with rounded corners and is to be located 3-3/4" from the left edge and 3/4" from the bottom edge of the envelope. (The long dimension of the window is to be parallel to the long dimension of the envelope.)

Window(s) on ALL envelopes are to be covered with a suitable transparent, low gloss, poly-type 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 standards/requirements.

PRODUCTION INSPECTION: Production inspection(s) may be required at the contractor's/subcontractor's plant for the purpose of establishing that the receipt of transmitted files, the printing of notices, the imaging, collating, folding, inserting, and mailing is being accomplished in accordance with contract quality attributes and requirements.

A production 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.

When a production inspection is required, the Government will notify the contractor.

INSERTING AND PACKING:

As required –

- Gather all pages in the notice in numerical sequence. Notice leaves are to be nested together with all faces forward. Fold from 8-1/2 x 11" down to 8-1/2 x 5-1/2" with recipient name/address out. Either wraparound or accordion folds are acceptable. Insert into 6-1/8 x 9-1/2" mail-out envelope with the return address and recipient's name and address on first page facing out for visibility through windows.

- Gather all pages in the notice in numerical sequence with all faces forward. Insert flat into 9 x 12" mail-out envelope with recipient's name and address on first page facing out for visibility through window.

When required, insert BRE envelope flat into the mail-out envelope behind the notice.

NOTE: It is the contractor's responsibility to assure that only the computer-generated address and Intelligent Mail Barcode on the notice will be visible through the mailing address window on the envelope and that only one notice and one BRE envelope (when required) is inserted into the appropriate mail-out envelope.

Delivered Shipments – Pack suitable in shipping containers.

Mailed Shipments – Mail each individual mailer.

DISTRIBUTION:

Delivered Shipments –

Notices – On the first order and whenever SSA makes a significant change to the language, format, appearance of a notice, or provides test files, deliver f.o.b. destination 20 samples of the mailer, from the electronic test files furnished, inserted into mail-out envelopes. DO NOT SEAL ENVELOPES. Samples shall be printed and constructed in accordance with these specifications. Deliver samples to: SSA, Forms Management Team, Baltimore, MD, (as specified on the print order - see Exhibit I).

Mail-out Envelopes – On the first order and whenever copy changes are required, deliver f.o.b. destination 10 production samples of the envelope to: SSA, Mail and Postage Policy Team, Baltimore, MD, (as specified on the print order – see Exhibit I).

Mailed Shipments –

Mail f.o.b. contractor's city each individual mailer. (NOTE: The contractor is responsible for all costs incurred in transporting the mailers to the U.S. Postal Service facility.)

All mailing shall be made at the First Class rate.

The contractor must meter all mail using Government supplied official postage meters. All envelopes for the CIPA workload are required to carry the USPS ancillary endorsement "ADDRESS SERVICE REQUESTED."

All copies mailed must conform to the appropriate regulations in the U.S. Postal Service manuals for "Domestic Mail" or "International Mail", as applicable.

Domestic First-Class Letter-Size Mail – All mail for this workload must be metered using Government supplied meters.

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 produce and use a USPS Intelligent Mail Barcode (IMB) full service option and achieve the maximum 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.

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.

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.

Intelligent Mail Barcoding, 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 Intelligent Mail Bar code 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.

International Mail –

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 for USPS IPA at the time of the mailing. To maximize postage savings, the contractor shall sort to the IPA Rate Group 1 through 15.

Pieces not qualifying for the IPA Rate Group Levels of discount shall be prepared at the Worldwide Non-presorted rate level and any remaining pieces that do not meet IPA qualifications will be sorted by individual country rules according to the USPS IMM in effect at the time of the mailing.

International Mail return addresses must show as the last line of the address "UNITED STATES OF AMERICA" or "USA" in all capital letters. All International Mail must be endorsed "PAR AVION" or "AIR MAIL" as described in the USPS IMM.

NOTE: Again, 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.

CASS Certification of CIPA and New Notice Files –

The files provided by SSA to the contractor are not CASS certified. Contractor will be required to complete all necessary processing to obtain certification and mail discounts for USPS.

CASS Certification – Contractor is required to perform the Coding Accuracy Support System (CASS) certification using USPS certified ZIP+4software, SSA supplies the completed IMB with the notice image. Contractor is required to furnish USPS with any required CASS certificates. All related costs to perform this operation must be included in submitted bid pricing. No additional reimbursement will be authorized.

IMPORTANT: Contractor <u>CANNOT</u> at any time perform move updates or address corrections on the notice address. Notices that require a move update can be separated/diverted and sent at the full USPS first class rate. If the contractor uses a mail sort house, the furnished mail package must not receive an updated mailing address label; these notices receive a "ADDRESS SERVICE REQUESTED" ancillary endorsement.

MAILING DOCUMENTATION: The contractor shall provide SSA with complete copies of all documents used by USPS to verify and accept the mail (e.g., computer records of presort ZIP+4, barcode breakdown, press runs, etc.) including GPO's Form 712 (Certificate of Conformance), noted with file date and mailer number. 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. The contractor will use Federal Agency Cost Code 276-00013 on all mailing documents.

Within 72 hours of being delivered to the USPS, the contractor shall provide the copies to SSA's Printing Management Team via overnight/next day delivery carrier (at contractor's expense). All copies must be legible and include both obverse and reverse side and should be addressed to: SSA, Printing Management Branch, Baltimore, MD, (as specified on the print order - see Exhibit I).

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 first day of printing and continue daily until the end of the term of the contract. Report is to be emailed to: SSA, Printing Management Branch, Baltimore, MD, (as specified on the print order - see Exhibit I).

The contractor is required to complete and email to SSA daily an MS EXCEL database/spreadsheet for each day of mailing (see Exhibit J). The database/spreadsheet will have fields for the contractor to complete. These fields will include: Job Title, Jacket Number, Program Number, and Print Order Number, as well as the itemized breakdown of the postage computation found on the postal Form PS3600R. The contractor will be required to email the completed database/spreadsheet within two (2) workdays of each mail drop to: SSA, Printing Management Branch, Baltimore, MD, (as specified on the print order – see Exhibit I).

Proofs and USPS validated copies of postal documentation must be delivered (via overnight carrier) to: SSA, Printing Management Branch, Baltimore, MD, (as specified on the print order - see Exhibit I).

Within 10 workdays of the mailing date, contractor must furnish one (1) copy of the billing payment voucher form 1034 for each print order showing amount of billing invoice to: SSA, Printing Management Branch, Baltimore, MD, (as specified on the print order - see Exhibit I). The original invoice must be sent to: U.S. Government Printing Office, Comptroller FMCE.

Upon termination of this contract, all furnished material must be destroyed.

All expenses incidental to picking up and returning materials, submitting proofs, and furnishing sample copies must be borne by the contractor.

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 or print order, as applicable.

The Postaward Conference must be held within five (5) workdays of notification of award.

Manuscript copy, camera copy, and/or negatives for envelopes and recycled logo/legend, as applicable, will be provided at the postaward conference or shortly thereafter.

Furnished material and proofs must be picked up from and delivered to: SSA, Printing Management Branch, Baltimore, MD, (as specified on the print order - see Exhibit I).

SCHEDULE FOR PROOFS –

The following schedule begins the workday after notification of the availability of print order and furnished material; the workday after notification will be the first workday of the schedule.

- Contractor must submit proofs for envelopes within seven (7) workdays of notification of availability of print order and furnished material.
- Proofs will be withheld no more than five (5) workdays from their receipt at SSA until they are made available for pickup. (The first workday after receipt of proofs at the ordering agency is day one (1) of the hold time.)
- If required due to author's alterations, the contractor must submit three (3) sets of revised proofs within five (5) workdays of notification. Revised proofs will be withheld no more than three (3) workdays from receipt at the ordering agency until they are made available for pickup.

SCHEDULE FOR PREPRODUCTION TESTS –

Prior to receiving wire transmission of live production data files each year, the contractor will be required to perform the following tests:

Wire Transmission Test –

This test is to be performed after the contract is awarded and the process is ready. The Government will notify the contractor when the test will be performed.

- The contractor will be required to receive approximately 45,000 notices within one (1) workday.
- The contractor will be required to perform a Record Count Verification same workday as receipt of complete transmission of the test files and furnish the Government with the exact counts.
- The Government will approve, conditionally approve, or disapprove within one (1) workday of receipt thereof.

Preproduction Validation Test –

- Contractor must submit required samples from test files within five (5) workdays of receipt of test files.
- The Government will approve, conditionally approve, or disapprove the preproduction validation test samples within five (5) workdays of receipt thereof.

- If required due author's alterations or contractor's error, the contractor must submit revised samples within five (5) workdays of notification. The Government will approve, conditionally approve, or disapprove the preproduction validation test samples within three (3) workdays of receipt thereof.

Preproduction Press and Mail Run Test –

- The test is to be performed within 10 workdays after final approval of preproduction validation test samples and after the contractor receives the materials necessary to perform the test.

- The contractor must produce a minimum of 25,000 notices in a continuous 12-hour period.

- The Government will approve, conditionally approve, or disapprove the samples within seven (7) workdays of receipt thereof.

NOTE: Contractor must notify the GPO of the date and time the preproduction press/mail-run test will be performed. In order for proper arrangements to be made, notification must be given at least 10 workdays prior to the preproduction press and mail run test.

The contractor will be required to have all material(s) necessary to perform these tests. The Government representative(s) 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 that the contractor can satisfactorily complete the requirements of this contract during live production.

Systems Change/Signature Change Validation Test –

- When required, contractor must submit required notice samples within seven (7) workdays of receipt of test files.

- Samples will be withheld no more than five (5) workdays from their receipt at SSA until they are made available for pickup.

- If required due to author's alterations or contractor's error, the contractor must submit additional samples within five (5) workdays of notification. The additional samples will be withheld no more than three (3) workdays from their receipt at SSA until they are made available for pickup.

SCHEDULE FOR PRODUCTION –

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.

Workday - For the purpose of this contract, the term "workday" is defined as Monday through Saturday each week, exclusive of the days on which Federal Government holidays are observed.

Live production files for the CIPA workload will transmit five days a week, Tuesday morning through Saturday morning, with each workload required to mail within two (2) workdays of receipt of the electronic task order, Monday through Saturday (i.e., for task orders received on the weekend, the schedule will commence on the next workday, Monday, and mail on Tuesday; task orders received on Thursday mail on Saturday).

Due to the complexity of the build and transmission of files, the contractor must be available to receive files 24 hours a day, seven (7) days a week. Contractor must be capable of handling this requirement and change their schedule accordingly.

NOTE: *Contractor should 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 (877) 697- 4889 and the lead contact for the Print Management Team. (See Exhibit I.)*

The contractor's FTMS software shall be operational for the receipt of data files 24 hours a day, seven (7) days a week, unless otherwise specified by the Government.

NOTE: The transmission of the first live files and electronic task order for actual live product will occur on April 1, 2013.

The following schedules begin the workday after receipt of the electronic task order; the workday after receipt will be the first workday of the schedule. NOTE: If the contractor receives a partial electronic task order, the schedule will not start until receipt of the balance of the task order.

- Contractor must complete the production and distribution of each daily transmission within two (2) workdays of receipt of each electronic task order (i.e., for task orders received on the weekend, the schedule will commence on the next workday, Monday, and mail on Tuesday; task orders received on Thursday mail on Saturday).

PRODUCTION AND PRESS SHEET INSPECTIONS: The contractor must notify the GPO of the date and time the production inspection 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(s). 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.

Contractor is required to email daily production and mailing totals, including holidays and weekends, to the SSA, Printing Management Branch. (See Exhibit I.)

The ship/deliver date indicated on the print order is the date products ordered for delivery f.o.b. destination must be delivered to the destination(s) specified, and products ordered for mailing f.o.b. contractor's city must be delivered to the post office.

Unscheduled material such as shipping documents, receipts or instructions, delivery lists, labels, etc., 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.

Upon completion of each order, the contractor is to notify the U.S. Government Printing Office of the date of shipment or delivery. Call (202) 512-0516 or 0520; callers outside the Washington, DC area may call toll free 1-800-424-9470 or 9471.

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 one (1) year's production requirements 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 for a like period of time.

The following item designations correspond to those listed in the **"SCHEDULE OF PRICES."**

I.		1
II.		3
III.	(a)	1
	(b)	1
	(c)	1
IV.	(a)	250
	(b)	40,288
	(c)	6,750
	(d)	750
	(e)	2,000
V.	(a)	40,288
	(b)	6,750
	(c)	750
	(d)	2,000
VI.	(a)	6,750
	(b)	750

SECTION 4. - SCHEDULE OF PRICES

Bids offered are f.o.b. destination for all delivered shipments, and f.o.b. contractor's city for all mailed shipments.

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 "DETERMINATIION 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.

All invoices submitted to the GPO shall be based on the most economical method of production.

Fractional parts of 1,000 will be prorated at the per-1,000 rate.

Cost of all required paper must be charged under Item V. "PAPER."

I. PROCESSING/FORMATTING FILES: The contractor will be allowed only one (1) charge per notice workload for the term of the contract to process and/or format the Advance Function Printing Data Stream (AFPDS) files, AFPDS resources, and the Mail Run Data files supplied necessary to print and mail the notices for each notice workload.

Processing/Formatting Files..... per notice workload.....$_____

II. COMPOSITION: Prices offered must include the cost of all operations (including proofs) and materials necessary in accordance with the terms of these specifications for envelopes.

Envelopes.....per envelope.....$_____

III. PREPRODUCTION TESTS: Price offered must include all costs incurred in performing the tests as specified in these specifications. These costs shall cover but are not limited to: machine time, personnel, all required materials, wire transmissions, electronic prepress, 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) Wire Transmission Test..... per test.....$_____

(b) Preproduction Validation Test..... per test.....$_____

(c) Systems Change/New Notice Files Validation Test..... per test.....$_____

_____
(Initials)

IV. PRINTING/IMAGING AND BINDING/CONSTRUCTION: Prices offered must include the cost of all materials and operations necessary for the printing/imaging and binding/construction of the product listed in accordance with these specifications.

(a) *Daily makeready/setup charge .....$_____

*Contractor will be allowed only one (1) makeready/setup charge per file date and one (1) makeready/setup charge for test file(s) when sent. This combined charge shall include all materials and operations necessary to makeready and/or setup the contractor's equipment for the CIPA notice files. Invoices submitted with more than one makeready/setup charge per day or for test file(s) will be disallowed.

(b) Notice: Printing/imaging in black ink, including binding ..... per 1,000 leaves .....$_____

(c) Mail-out Envelope (6-1/8 x 9-1/2"), including construction..... per 1,000 envelopes .....$_____

(d) Mail-out Envelope (9 x 12"), including construction..... per 1,000 envelopes .....$_____

(e) Business Reply Envelope, including construction ..... per 1,000 envelopes .....$_____

V. 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. The cost of any paper required for makeready or running spoilage must be included in the prices offered.

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

Notices: A charge will be allowed for each page-size leaf.
Envelopes: Each envelope.

Per 1,000 Leaves

(a) Notice:
White Offset Book (50-lb.) .....$_____

(b) Mail-out Envelope (6-1/8 x 9-1/2"):
White Wove (24-lb.), or, at contractor's option, White Offset Book (60-lb.).....$_____

(c) Mail-out Envelope (9 x 12"):
White Wove (24-lb.), or, at contractor's option, White Offset Book (60-lb.).....$_____

(d) Business Reply Envelope:
Goldenrod stock (24-lb.) .....$_____

VI. INSERTING, PACKING, AND MAILING: Prices offered must include the cost of all required materials and operations necessary for the mailing of the notice including cost of gathering notice(s) (single or multiple leaves) in proper sequence, folding to required size in accordance with these specifications, and inserting notice(s) and appropriate inserts as required (i.e., BRE envelope) into appropriate mail-out envelope.

(a) Mailer (6-1/8 x 9-1/2") ..... per 1,000 mailers .....$_____

(b) Mailer (9 x 12") ..... per 1,000 mailers .....$_____

_____
(Initials)

LOCATION OF POST OFFICE: All mailing will be made from the _____

Post Office located at Street Address _____,

City_____, State_____, Zip Code _____

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)

EXHIBIT A
CONTRACTOR PERSONNEL SECURITY CERTIFICATION

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 criminal prosecution under Federal law.

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Contractor	Date
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Contractor Employee	Date
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Contractor Employee	Date
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Contractor Employee	Date

EXHIBIT A
CONTRACTOR PERSONNEL SECURITY CERTIFICATION

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EXHIBIT A
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SECURITY AND SUITABILITY REQUIREMENTS

Purpose: To provide procedures for obtaining suitability determinations for contractor personnel who will be performing under the contract.

Definition: *"Performing under the contract"* is defined as either working on-site at an SSA facility (including visiting the SSA site for any reason) or having access to agency programmatic or sensitive information.

Suitability Factors: Suitability considerations include:

- Delinquency or misconduct in prior employment.
- Criminal, dishonest, infamous, or notoriously disgraceful conduct.
- The nature and seriousness of the conduct.
- When the conduct occurred.
- The applicant's or employee's age at the time of the conduct.
- The circumstances surrounding the conduct.
- Intentional false statement, deception, or fraud on application forms.
- Habitual use of intoxicating beverages to excess.
- Abuse of narcotics, drugs, or other controlled substances.
- Reasonable doubt as to the loyalty of the individual to the Government of the United States.
- The kind of position for which the person is applying or in which the person is employed.
- Contributing social and environmental conditions.
- The absence or presence of rehabilitation or efforts towards rehabilitation.

Authorities:

Personnel security requirements for programmatic and sensitive information are mandated by Executive Orders 10450 and 12968, and Title 5, Code of Federal Regulations (CFR), Parts 731, 732, and 736.

Protective security requirements mandated by the General Services Administration (GSA).

Required Forms:

Two (2) completed forms FD-258, "Fingerprint Charts*," (The contractor will absorb the costs for obtaining fingerprints.)

One (1) completed SF-85P, "Questionnaire for Public Trust Positions,"

One (1) completed Optional Form 306, "Declaration for Federal Employment,"
Note: For Federal and Federal Contract Employment

One (1) completed "Fair Credit Reporting Act (FCRA) authorization form**," and

For a non-U.S. citizen, one (1) legible photocopy of the work authorization permit and Social Security card.

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* Preprinted with MD 900310Z, SOC SEC ADMIN, PROT SEC BR, BALTIMORE, MD on the form.

** The FCRA, as amended on September 30, 1997, requires that the Government notify each applicant, employee, and contractor (in a document consisting solely of the notice) that a consumer report may be used for employment purposes. The applicant, employee, or contractor must authorize this use in writing before the Government obtains the consumer report. The FCRA also requires that, before taking adverse action relative to an employment decision based on a consumer report, the agency provide the consumer with a copy of the report, and a copy of the Federal Trade Commission's Consumer Rights Notice. To comply with these requirements, SSA requires that the contractor submit each applicant's or employee's signed FCRA authorization form along with the other investigative documents.

Obtaining Forms: The contracting officer will include a set of the forms with the signed contract.

The contractor may contact the Social Security Administration (SSA) Personnel Security Suitability Program Officer (SPO) on (410) 965-4548 for additional forms.

Forms Completion: The contractor must make sure that all forms are fully completed. This includes making sure that the fingerprint charts are printed legibly or typed in black ink and all signatures are in black ink.

Forms Submission: The contractor must submit the completed forms for each employee and replacement employee (including each subcontractor employee) who will be performing under the contract to the Personnel Security SPO. The Government will not permit contractor personnel to perform under the contract until the prescreening process is complete. See prescreening below.

Cover Letter:

The contractor must provide a *cover letter* listing:

The names of employees for whom completed forms are submitted;

The contract number; and

The contractor's contact name and telephone number.

Notes: (1) The prescreening process may take up to fifteen (15) days. (2) If contractor personnel will require access to an SSA facility, the contractor should contact the SSA project officer to obtain a copy of the access procedures. Also note that some facilities require access forms to be completed and approved after prescreening is completed but before access. The access process may take as many as seven (7) days (five (5) working days) at a Headquarter's facility. For access to a regional or field facility, contact the SSA project officer to determine how much time may be needed.

The Personnel Security SPO's address is:

Social Security Administration
OPE Security and Suitability Staff
Room 1260 Dunleavy
6401 Security Boulevard
Baltimore, Maryland 21235

Phone: (410) 965-4548

Note: The SSA Project Officer (PO) needs to know for whom and when the completed forms are submitted. To accomplish this, when submitting the forms for processing, the contractor must send a copy of the cover letter or e-mail this information to the PO.

Waiver:

For contractor employees performing services on-site at an SSA facility up to one (1) day *and* where access to programmatic or sensitive information is not required, the contractor may request that the Personnel Security SPO waive submission of the FD-258s and the Credit Authorization form.

If the SPO authorizes a waiver, it will apply only to the one (1) day for which the contractor requested it.

If an individual subsequently performs or is expected to perform additional work, the SPO will not approve another waiver. The contractor must therefore submit the FD-258s and Credit Authorization form.

Prescreening:

The Personnel Security SPO will use the information from the completed forms as part of the basis for making a prescreening determination. The Personnel Security SPO will notify the contractor whether a prospective employee may or may perform under the contract pending a final suitability determination. Concurrently, the Personnel Security SPO will send a copy of the notification to the contracting officer and project officer.

Timeframe for Prescreening

The contractor should anticipate that the Personnel Security SPO will issue the notification within fifteen (15) days after receipt of the properly completed forms.

Final Suitability Determination

The Personnel Security SPO makes the final suitability determination for each contractor employee.

Note: The contractor may expect a final suitability determination to be received approximately 45 days after submittal of the completed forms.

Unsuitable Employees:

If the Government determines that a contractor employee or applicant is unsuitable, the Personnel Security SPO will advise the contractor in writing that such employee may not continue to perform or begin performing under the contract. Concurrently, the Personnel Security SPO will send a copy of the notification to the CO and PO.

When the contractor receives the notification, the contractor must *immediately* remove the employee from performing under the contract. The contractor must confirm, in writing to the SPO, the date of the employee's removal.

Concurrently, the SPO will advise the PO and CO that he has notified the contractor that the proposed contractor personnel have been determined unsuitable/unfit to perform on the contract and must be replaced. The letter will also request that a replacement(s) be named and the appropriate security forms completed as quickly as possible in order that contract performance will not be adversely impacted. The SPO's letter will also advise the contractor to contact the CO if there are any contract performance problems related to the removal.

Neither the denial resulting from the prescreening nor the removal of an individual determined unsuitable gives rise to an equitable adjustment under the contract.

Contractor Notification to Government:

In the event that contractor personnel performing on this contract either leave the company or are removed from the project, or are arrested or charged with a crime during the term of this contract, the contractor shall notify the Personnel Security SPO immediately. In the notification, the contractor must provide the contractor personnel name(s), SSN, the type of charge(s), the court date, and, if available, the disposition of the charge(s).

Government Control:

The Government has full control over granting, denying, or withholding access to SSA facilities and for requiring the contractor to remove personnel from performing under the contract.

Following a successful prescreening, the Government will usually permit contractor personnel to work on the contract pending a final suitability determination.

Permitting a contractor employee to work does not assure that a favorable final suitability determination will follow. This permission to work or issuance of a favorable final suitability determination does not prevent, preclude, or bar the Government from withdrawing or terminating any such permission or suitability determination.

Standard Form 85P
Revised September 1995
U.S. Office of Personnel Management
5 CFR Parts 731, 732, and 736

Form approved:
OMB No. 3206-0191
NSN 7540-01-317-7372
85-1602

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 $10,000, 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 trustworthiness 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:

PRIVACY ACT ROUTINE USES

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 or 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 to 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

Standard Form 85P (EG)
Revised September 1995
U.S. Office of Personnel Management
5 CFR Parts 731, 732, and 736

QUESTIONNAIRE FOR PUBLIC TRUST POSITIONS

Form approved:
OMB No. 3206-0191
NSN 7540-01-317-7372
85-1602

OPM USE ONLY | Codes | Case Number

Agency Use Only *(Complete items A through P using instructions provided by USOPM)*

A Type of Investigation	B Extra Coverage	C Sensitivity/ Risk Level	D Compu/ ADP	E Nature of Action Code	F Date of Action	Month	Day	Year

G Geographic Location	H Position Code	I Position Title

J SON	K Location of Official Personnel Folder	Other Address	ZIP Code
	☐ None ☐ NPRC ☐ At SON		

L SOI	M Location of Security Folder	Other Address	ZIP Code
	☐ None ☐ At SOI ☐ NPI		

N OPAC-ALC Number	O Accounting Data and/or Agency Case Number

P Requesting Official	Name and Title	Signature	Telephone Number	Date
			( )	

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 have no middle name, enter "NMN".
- 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.

2 DATE OF BIRTH

Month	Day	Year

3 PLACE OF BIRTH - Use the two letter code for the State.

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

4 SOCIAL SECURITY NUMBER

5 OTHER NAMES USED

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

6 OTHER IDENTIFYING INFORMATION

Height *(feet and inches)*	Weight *(pounds)*	Hair Color	Eye Color	Sex *(Mark one box)*
				☐ Female ☐ Male

7 TELEPHONE NUMBERS

Work *(include Area Code and extension)*	Home *(include Area Code)*
☐ Day ☐ Night ( )	☐ Day ☐ Night ( )

8 CITIZENSHIP

a Mark the box at the right that reflects your current citizenship status, and follow its instructions.

- ☐ 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.*

b Your Mother's Maiden Name

c 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?)*

Court	City	State	Certificate Number	Month/Day/Year Issued

Citizenship Certificate *(Where was the certificate issued?)*

City	State	Certificate Number	Month/Day/Year 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.	Month/Day/Year	Explanation

U.S. Passport

This may be either a current or previous U.S. Passport	Passport Number	Month/Day/Year Issued

d 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. Country

e ALIEN If you are an alien, provide the following information:

Place You Entered the United States:	City	State	Date You Entered U.S. 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

9 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.

#1	Month/Year To Month/Year Present	Street Address	Apt. #	City (Country)		State	ZIP Code
Name of Person Who Knows You		Street Address	Apt. #	City (Country)	State	ZIP Code	Telephone Number ( )
#2	Month/Year To Month/Year	Street Address	Apt. #	City (Country)		State	ZIP Code
Name of Person Who Knew You		Street Address	Apt. #	City (Country)	State	ZIP Code	Telephone Number ( )
#3	Month/Year To Month/Year	Street Address	Apt. #	City (Country)		State	ZIP Code
Name of Person Who Knew You		Street Address	Apt. #	City (Country)	State	ZIP Code	Telephone Number ( )
#4	Month/Year To Month/Year	Street Address	Apt. #	City (Country)		State	ZIP Code
Name of Person Who Knew You		Street Address	Apt. #	City (Country)	State	ZIP Code	Telephone Number ( )
#5	Month/Year To Month/Year	Street Address	Apt. #	City (Country)		State	ZIP Code
Name of Person Who Knew You		Street Address	Apt. #	City (Country)	State	ZIP Code	Telephone Number ( )

10 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.

#1	Month/Year To Month/Year	Code	Name of School	Degree/Diploma/Other			Month/Year Awarded
Street Address and City (Country) of School						State	ZIP Code
Name of Person Who Knew You		Street Address	Apt. #	City (Country)	State	ZIP Code	Telephone Number ( )
#2	Month/Year To Month/Year	Code	Name of School	Degree/Diploma/Other			Month/Year Awarded
Street Address and City (Country) of School						State	ZIP Code
Name of Person Who Knew You		Street Address	Apt. #	City (Country)	State	ZIP Code	Telephone Number ( )
#3	Month/Year To Month/Year	Code	Name of School	Degree/Diploma/Other			Month/Year Awarded
Street Address and City (Country) of School						State	ZIP Code
Name of Person Who Knew You		Street Address	Apt. #	City (Country)	State	ZIP Code	Telephone Number ( )

Enter your Social Security Number before going to the next page →

11 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.

#1 Month/Year To Month/Year Present	Code	Employer/Verifier Name/Military Duty Location	Your Position Title/Military Rank		
Employer's/Verifier's Street Address		City (Country)	State	ZIP Code	Telephone Number ( )
Street Address of Job Location (if different than Employer's Address)		City (Country)	State	ZIP Code	Telephone Number ( )
Supervisor's Name & Street Address (if different than Job Location)		City (Country)	State	ZIP Code	Telephone Number ( )

PREVIOUS PERIODS OF ACTIVITY (Block #1)	Month/Year To Month/Year	Position Title	Supervisor
	Month/Year To Month/Year	Position Title	Supervisor
	Month/Year To Month/Year	Position Title	Supervisor

#2 Month/Year To Month/Year	Code	Employer/Verifier Name/Military Duty Location	Your Position Title/Military Rank		
Employer's/Verifier's Street Address		City (Country)	State	ZIP Code	Telephone Number ( )
Street Address of Job Location (if different than Employer's Address)		City (Country)	State	ZIP Code	Telephone Number ( )
Supervisor's Name & Street Address (if different than Job Location)		City (Country)	State	ZIP Code	Telephone Number ( )

PREVIOUS PERIODS OF ACTIVITY (Block #2)	Month/Year To Month/Year	Position Title	Supervisor
	Month/Year To Month/Year	Position Title	Supervisor
	Month/Year To Month/Year	Position Title	Supervisor

#3 Month/Year To Month/Year	Code	Employer/Verifier Name/Military Duty Location	Your Position Title/Military Rank		
Employer's/Verifier's Street Address		City (Country)	State	ZIP Code	Telephone Number ( )
Street Address of Job Location (if different than Employer's Address)		City (Country)	State	ZIP Code	Telephone Number ( )
Supervisor's Name & Street Address (if different than Job Location)		City (Country)	State	ZIP Code	Telephone Number ( )

PREVIOUS PERIODS OF ACTIVITY (Block #3)	Month/Year To Month/Year	Position Title	Supervisor
	Month/Year To Month/Year	Position Title	Supervisor
	Month/Year To Month/Year	Position Title	Supervisor

Enter your Social Security Number before going to the next page →

YOUR EMPLOYMENT ACTIVITIES *(CONTINUED)*

#4 Month/Year To Month/Year	Code	Employer/Verifier Name/Military Duty Location	Your Position Title/Military Rank		
Employer's/Verifier's Street Address		City (Country)	State	ZIP Code	Telephone Number ( )
Street Address of Job Location (if different than Employer's Address)		City (Country)	State	ZIP Code	Telephone Number ( )
Supervisor's Name & Street Address (if different than Job Location)		City (Country)	State	ZIP Code	Telephone Number ( )

PREVIOUS PERIODS OF ACTIVITY *(Block #4)*	Month/Year To Month/Year	Position Title	Supervisor
	Month/Year To Month/Year	Position Title	Supervisor
	Month/Year To Month/Year	Position Title	Supervisor

#5 Month/Year To Month/Year	Code	Employer/Verifier Name/Military Duty Location	Your Position Title/Military Rank		
Employer's/Verifier's Street Address		City (Country)	State	ZIP Code	Telephone Number ( )
Street Address of Job Location (if different than Employer's Address)		City (Country)	State	ZIP Code	Telephone Number ( )
Supervisor's Name & Street Address (if different than Job Location)		City (Country)	State	ZIP Code	Telephone Number ( )

PREVIOUS PERIODS OF ACTIVITY *(Block #5)*	Month/Year To Month/Year	Position Title	Supervisor
	Month/Year To Month/Year	Position Title	Supervisor
	Month/Year To Month/Year	Position Title	Supervisor

#6 Month/Year To Month/Year	Code	Employer/Verifier Name/Military Duty Location	Your Position Title/Military Rank		
Employer's/Verifier's Street Address		City (Country)	State	ZIP Code	Telephone Number ( )
Street Address of Job Location (if different than Employer's Address)		City (Country)	State	ZIP Code	Telephone Number ( )
Supervisor's Name & Street Address (if different than Job Location)		City (Country)	State	ZIP Code	Telephone Number ( )

PREVIOUS PERIODS OF ACTIVITY *(Block #6)*	Month/Year To Month/Year	Position Title	Supervisor
	Month/Year To Month/Year	Position Title	Supervisor
	Month/Year To Month/Year	Position Title	Supervisor

12 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.	Yes	No

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

Month/Year	Code	Specify Reason	Employer's Name and Address *(Include city/Country if outside U.S.)*	State	ZIP Code

Enter your Social Security Number before going to the next page →

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.

Name	Dates Known Month/Year Month/Year To	Telephone Number Day Night ( )		
#1				
Home or Work Address		City (Country)	State	ZIP Code
Name #2	Dates Known Month/Year Month/Year To	Telephone Number Day Night ( )		
Home or Work Address		City (Country)	State	ZIP Code
Name #3	Dates Known Month/Year Month/Year To	Telephone Number Day Night ( )		
Home or Work Address		City (Country)	State	ZIP Code

14 YOUR MARITAL STATUS

Mark one of the following boxes to show your current marital status:

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

Current Spouse Complete the following about your current spouse.

Full Name	Date of Birth *(Mo./Day/Yr.)*	Place of Birth *(Include country if outside the U.S.)*	Social Security Number
Other Names Used *(Specify maiden name, names by other marriages, etc., and show dates used for each name)*			
Country of Citizenship	Date Married *(Mo./Day/Yr.)*	Place Married *(Include country if outside the U.S.)*	State
If Separated, Date of Separation *(Mo./Day/Yr.)*	If Legally Separated, Where is the Record Located? City *(Country)*		State
Address of Current Spouse *(Street, city, and country if outside the U.S.)*		State	ZIP Code

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)*

	Full Name *(If deceased, check box on the left before entering name)*	Code	Date of Birth Month/Day/Year	Country of Birth	Country(ies) of Citizenship	Current Street Address and City *(country)* of Living Relatives	State
		1					
		2					

Enter your Social Security Number before going to the next page →

16 YOUR MILITARY HISTORY

	Yes	No
a Have you served in the United States military?		
b 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.

Month/Year	Month/Year	Code	Service/Certificate No.	O	E	Status: Active	Status: Active Reserve	Status: Inactive Reserve	Status: National Guard (State)	Country
	To									
	To									

17 YOUR SELECTIVE SERVICE RECORD

	Yes	No
a Are you a male born after December 31, 1959? If "**No**," go to **18**. If "**Yes**," go to b.		
b Have you registered with the Selective Service System? If "Yes," provide your registration number. If "**No**," show the reason for your legal exemption below.		

Registration Number | Legal Exemption Explanation

18 YOUR INVESTIGATIONS RECORD

	Yes	No
a 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.		

Codes for Investigating Agency
1 - Defense Department **4** - FBI
2 - State Department **5** - Treasury Department
3 - Office of Personnel Management **6** - Other *(Specify)*

Codes for Security Clearance Received
0 - Not Required **3** - Top Secret **6** - L
1 - Confidential **4** - Sensitive Compartmented Information **7** - Other
2 - Secret **5** - Q

Month/Year	Agency Code	Other Agency	Clearance Code	Month/Year	Agency Code	Other Agency	Clearance Code

	Yes	No
b 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.		

Month/Year	Department or Agency Taking Action	Month/Year	Department or Agency Taking Action

19 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.)

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

- 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").

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

	Month/Year	Month/Year	Code	Country		Month/Year	Month/Year	Code	Country
#1		To			#5		To		
#2		To			#6		To		
#3		To			#7		To		
#4		To			#8		To		

Enter your Social Security Number before going to the next page →

20 YOUR POLICE RECORD *(Do not include anything that happened before your 16th 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.)

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

Yes	No

Month/Year	Offense	Action Taken	Law Enforcement Authority or Court *(City and county/country if outside the U.S.)*	State	ZIP Code

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.

	Yes	No
a 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.), hallucinogenics (LSD, PCP, etc.), or prescription drugs?		
b 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.

Month/Year	Month/Year	Controlled Substance/Prescription Drug Used	Number of Times Used
	To		
	To		
	To		

22 YOUR FINANCIAL RECORD

	Yes	No
a 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.		

Month/Year	Type of Action	Name Action Occurred Under	Name/Address of Court or Agency Handling Case	State	ZIP Code

	Yes	No
b 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:

Month/Year	Type of Loan or Obligation and Account #	Name/Address of Creditor or Obligee	State	ZIP Code

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 →

Standard Form 85P
Revised September 1995
U.S. Office of Personnel Management
5 CFR Parts 731, 732, and 736

Form approved:
OMB No. 3206-0191
NSN 7540-01-317-7372
85-1602

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.

Signature *(Sign in ink)*	Full Name *(Type or Print Legibly)*			Date Signed
Other Names Used				Social Security Number
Current Address *(Street, City)*		State	ZIP Code	Home Telephone Number *(Include Area Code)* ( )

Standard Form 85P
Revised September 1995
U.S. Office of Personnel Management
5 CFR Parts 731, 732, and 736

Form approved:
OMB No. 3206-0191
NSN 7540-01-317-7372
85-1602

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?

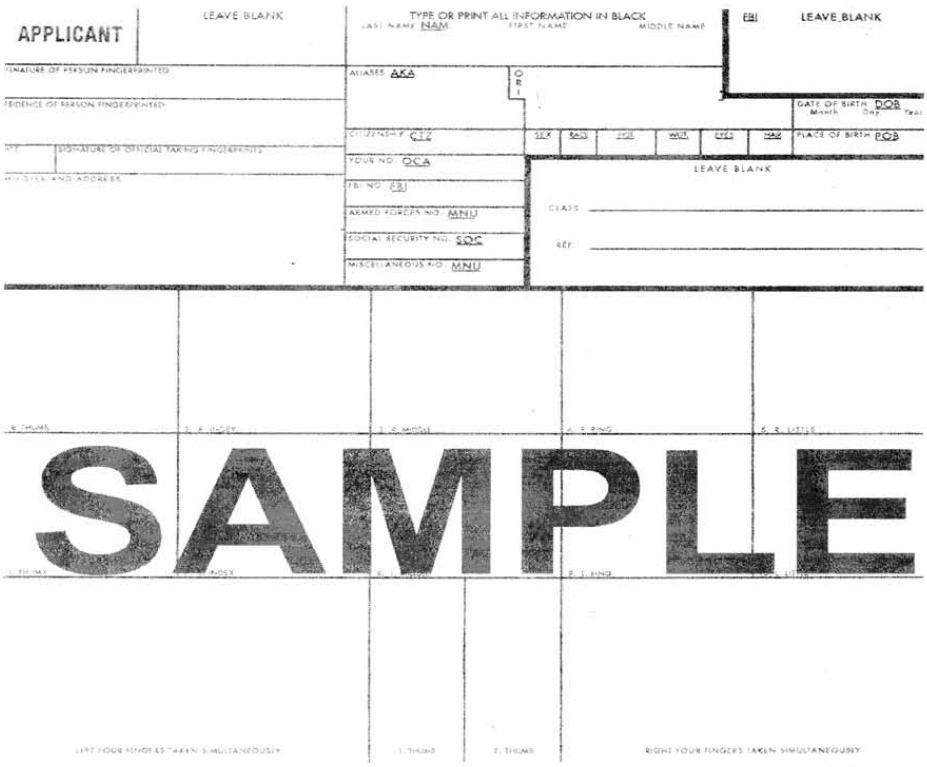
I understand that the information released pursuant to this release is for use by the Federal Government only for purposes provided in the Standard Form 85P and that it may be redisclosed by the Government only as authorized by law.

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.

Signature *(Sign in ink)*	Full Name *(Type or Print Legibly)*			Date Signed
Other Names Used				Social Security Number
Current Address *(Street, City)*		State	ZIP Code	Home Telephone Number *(Include Area Code)* ( )

Print Form Save Form Clear Form

EXHIBIT D
SAMPLE OF FINGERPRINT CARD



Declaration for Federal Employment

Form Approved
OMB No. 3206-0182

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/GOVT-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 recognitions and 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.

Declaration for Federal Employment

Form Approved
OMB No. 3206-0182

GENERAL INFORMATION

1. FULL NAME *(First, middle, last)* ◆	2. SOCIAL SECURITY NUMBER ◆
3. PLACE OF BIRTH *(Include city and state or country)* ◆	4. DATE OF BIRTH *(MM/DD/YYYY)* ◆
5. OTHER NAMES EVER USED *(For example, maiden name, nickname, etc)* ◆ ◆	6. PHONE NUMBERS *(Include area codes)* Day ◆ Night ◆

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 must 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" skip 7b and 7c. If "YES" go to 7b.*

7b. Have you registered with the Selective Service System? ☐ YES ☐ NO *If "NO" go to 7c.*

7c. If "NO," describe your reason(s) in item #16.

Military Service

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

Branch	From MM/DD/YYYY	To MM/DD/YYYY	Type of Discharge

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.

		YES	NO
9.	During the last 10 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 10 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 now 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, an 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

Form Approved:
OMB No. 3206-0182

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 ☐

Clear Form | Print Form | Save Form

Exhibit F

Federal Investigations Notice

Letter No. 98-02
Date: March 6, 1998

On September 30, 1997, amendments to the Fair Credit Reporting Act (FCRA) (15 U.S.C. § 1681, *et seq.)* became effective as a result of the Consumer Credit Reporting Reform Act of 1996. The amendments require changes on the part of the users of consumer reports and providers of information to consumer reporting agencies. These changes impact on OPM-IS as the provider of investigative services to other Federal agencies, and on our customer agencies as the final users of credit information gathered as a result of OPM's investigations.

Most notably, **Section 1681b** of title 15 addresses permissible purposes for which consumer reports may be furnished and conditions for furnishing and using consumer reports for employment purposes. If an a enc. intends to use a consumer report for employment purposes, **Subsection 1681b (b) (2)** of title 15 requires that the applicant/employee be notified in a document consisting solely of the notice that a consumer report may be used, and the applicant/employee must authorize this use in writing before the consumer report is obtained. **Subsection 1681b (b)(3)** of title 15 requires that, before taking adverse action relative to an employment decision based on a consumer report, the agency must provide the consumer with a copy of the report, and a copy of the Federal Trade Commission's (FTC) Consumer Rights Notice.

The notice, disclosure, certification and adverse action requirements of the **FCRA** do not directly apply to OPM-IS in its role as the provider of investigative services to other requesting Federal agencies. However, we do obtain credit reports on behalf of other Federal agencies, and will require those Federal agencies to certify that they are the procurer of the credit report and that they are compliant with the FCRA's relevant provisions. We are, therefore, sending under separate cover a request to each agency for a one-time blanket certification to this effect, to be completed and returned to OPM-IS no later than May 1, 1998.

We will ask that the certification acknowledge that the requesting Federal agency is the procurer of the credit report for purposes of compliance with the FCRA. We will also ask that the requesting Federal agency certify that it is compliant with all relevant provisions of the FCRA. This certification should include certification that the agency will (a) clearly and conspicuously disclose to the

subject of investigation, in a written document consisting solely of the disclosure, that the agency may obtain a credit report for employment purposes; and (b) obtain the subject's written authorization to obtain the credit report. It will also state that the agency will not take adverse action against the subject of investigation, based in whole or in part upon the credit report, without first providing the subject a copy of the report and a written description of the subject's rights as described by the FTC under **Section 1681g(c)(3)** of title 15. Finally, the certification must state that the requesting Federal agency will not use any information from the consumer report in violation of any applicable equal employment opportunity law or regulation.

A sample release for obtaining written authorization from each affected applicant/employee, as well as a copy of the FTC's Consumer Rights Notice are attached for your information and may be reproduced as necessary. You can obtain additional information regarding the FCRA at the Federal Trade Commission's web site (http://www.ftc.gov).

Attachments

Inquiries: OPM-IS, Oversight and Technical Assistance Division, 202-606-1042
OPM-FIPC, Contract Management Branch, 724-794-5612
Code:736
Distribution: SOI/SON's
Letter Expires: When superseded

SAMPLE RELEASE
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)

EXHIBIT F
FAIR CREDIT REPORTING ACT
AUTHORIZATION FORM

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.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness, and privacy of information in the files of every "consumer reporting agency" (CRA). Most CRAs are credit bureaus that gather and sell information about you -- such as if you pay your bills on time or have filed bankruptcy -- to creditors, employers, landlords, and other businesses. You can find the complete text of the FCRA, 15 U.S. C. 1681-168 1 u, at the Federal Trade Commission's web site (http:www.FTC.GOV). The FCRA gives you specific rights, as outlined below. You may have additional rights under state law. You may contact a state or local consumer protection agency or a state attorney general to learn those rights.

- You must be told if information in your file has been used against you. Anyone who uses information from a CRA to take action against you -- such as denying an application for credit, insurance, or employment -- must tell you, and give you the name, address, and phone number of the CRA that provided the consumer report.

- You can find out what is in your file. At your request, a CRA must give you the information in your file, and a list of everyone who has requested it recently. There is no charge for the report if a person has taken action against you because of information supplied by the CRA, if you request the report within 60 days of receiving notice of the action. You also are entitled to one free report every twelve months upon request if you certify that (1) you are unemployed and plan to seek employment within 60 days, (2) you are on welfare, or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.

- You can dispute inaccurate information with the CRA. If you tell a CRA that your file contains inaccurate information, the CRA must investigate the items (usually within 30 days) by presenting to its information source all relevant evidence you submit, unless your dispute is frivolous. The source must review your evidence and report its findings to the CRA. (The source also must advise national CRAs -- to which it has provided the data -- of any error.) The CRA must give you a written report of the investigation, and a copy of your report if the investigation results in any change. If the CRA's investigation does not resolve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If an item is deleted or a dispute statement is filed, you may ask that anyone who has recently received your report be notified of the change.

- Inaccurate information must be corrected or deleted. A CRA must remove or correct inaccurate or unverified information from its files, usually within 30 days after you dispute it. However, the CRA is not required to remove accurate data from your file unless it is outdated (as described below) or cannot be verified. If your dispute results in any change to your report, the CRA cannot reinsert into your file a disputed item unless the information source verifies its accuracy and completeness. In addition, the CRA must give you a written notice telling you it has reinserted the item. The notice must include the name, address and phone number of the information source.

- You can dispute inaccurate items with the source of the information. If you tell anyone - - such as a creditor who reports to a CRA -- that you dispute an item, they may not then report the information to a CRAwithout including a notice of your dispute. In addition, once you've notified the source of the error in writing, it may not continue to report the information if it is, in fact, an error.

- Outdated information may not be reported. In most cases, a CRA may not report negative information that is more than seven years old; ten years for bankruptcies.

- Access to your file is limited. A CRA may provide information about you only to people with a need recognized by the FCRA -- usually to consider an application with a creditor, insurer, employer, landlord, or other business.

EXHIBIT F
FAIR CREDIT REPORTING ACT
AUTHORIZATION FORM

- Your consent is required for reports that are provided to employers, or reports that contain medical information. A CRA may not give out information about you to your employer, or prospective employer, without your written consent. A CRA may not report medical information about you to creditors, insurers, or employers, without your permission.

- You may choose to exclude your name from CRA lists for unsolicited credit and insurance offers. Creditors and insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must include a toll-free phone number for you to call if you want your name and address removed from future lists. If you call, you must be kept off the lists for two years. If you request, complete, and return the CRA form provided for this purpose, you must be taken off the lists indefinitely.

- You may seek damages from violators. If a CRA, a user or (in some cases) a provider of CRA data, violates the FCRA, you may sue them in state or federal court.

The FCRA gives several different federal agencies authority to enforce the FCRA:

FOR QUESTIO S OR CO CER S REGARDI G:	PLEASE CO TACT:
CRA's creditors and others not listed below	Federal Trade Commission Consumer Response Center-FCRA Washington, DC 20580 202-326-3761
National banks, Federal branches/agencies of foreign banks (word "National" or initials "N.A" appear in or after banks 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 Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (word "Federal or initials "F.S.B." appear in federal institutions name"	Office of Thrift Supervision Consumer Programs 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 703-518-6360
State chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corp. Div. of Compliance & Consumer Affairs Washington, DC 20429 202-934-FDIC
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board of 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 the Agriculture Office of Deputy Administrator-GIPSA Washington, DC 20250 202-720-7051

EXHIBIT G
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:

Audit Report
Program 123-S/SSA Notices Name/PO#54001/File Date
PC # and Sequence Numbers and Volume

Inserter ID	Date	Start Time	End Time	Start Range	End Range	Total	EVENT	STATUS
Inserter 1	05/10/12	10:31:04 AM	11:12:45 AM	19386	21567	2182	Standard Processing	Inserted
Operator Joe	05/10/12	11:12:50 AM	11:12:50 AM	21568		1	Diverted	Routed to Reprint
	05/10/12	11:13:10 AM	11:28:06 AM	21569	22516	948	Standard Processing	Inserted
	05/10/12	11:28:07 AM	11:28:10 AM	22517	22518	2	Diverted/ leave count unverified	Routed to Reprint
	05/10/12	11:29:30 AM	11:29:35 AM	22519	22521	3	Diverted/missing piece	Routed to Reprint
	05/10/12	11:29:45 AM	11:30:15 AM	22522		1	Diverted/manual insertion of pub	Manual Scan
	05/10/12	11:30:34 AM	11:40:35 AM	22523		1	Diverted/misread	Manual Scan
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	22518	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

EXHIBIT G
100% ACCOUNTABILITY AND SUMMARY REPORTS

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

Summary Report

Job Information			Operation Information	
Job Name:	XYZ Notice			
PO #	54001		Start Range:	1
Piece Quantity:	35862		End Range	35862
Job Status:	Completed			
Date Created:	05/10/12	10:29:54		
Date Completed:	05/11/12	14:22:34		

Statistical Summary

35537 Processed Pieces -	Completed 05/10/12
325 Processed Reprints -	Completed 05/11/12
35862 Total Pieces Inserted -	Completed 05/11/12
0 Variances -	Job Complete

EXHIBIT H
SYSTEM PLAN

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)_____

EXHIBIT I
KEY SSA AND GPO PERSONNEL
CONTACT INFORMATION

CONTACT INFORMATION

Print Management Team
Social Security Administration
Kenneth Wetzelberger,
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Forms Management Team
Social Security Administration
Attn: Sherry Leverett,
1337 Annex Bldg.,
6401 Security Boulevard,
Baltimore, MD 21235-6401.

Mail and Postage Policy Team
Social Security Administration
Attn: Francine Moore
1712 Annex Bldg.,
6401 Security Boulevard,
Baltimore, MD 21235-6401.

Help Desk
877-697-4889

GPO
Linda Rodano
202-512-0310 (ext. 31359)

EXHIBIT J
DATABASE/SPREADSHEET
FOR POSTAL DOCUMENTATION

USPS Postage Breakdown

Contractor: _____ Date Sent: _____

Job Title: _____ Mail Date: _____ Print Order #: _____

Req. #: _____ Program #: _____ Cost Code: _____

Discount	Pieces					Piece Rate					Postage					Total
	1oz	*2oz*	*3oz*	*4oz*	*5oz*	*1oz*	*2oz*	*3oz*	*4oz*	*5oz*	*1oz*	*2oz*	*3oz*	*4oz*	*5oz*	
Carrier Route																
5 Digit																
3 Digit																
Automation AADC																
Automation Mixed AADC																
Non Auto. Presort																
Non Auto. Single Piece																
IPA (International Mail)																
Misc. Pieces																
Over 5oz	**No. of Pieces**										**Postage**					

Total USPS Postage	

EXHIBIT K
MAIL RUN DATA FILE (MRDF)

Mail Run Data File (MRDF)
Or Item Level Accountability File

Record Descriptions		Position	Length
Job ID		1 – 5	5
Piece ID		6 – 11	6
Total Pages		12 – 13	2
Select Feeder 2	(0 = No Feed, 1 = Feed)	14	1
Select Feeder 3		15	1
Select Feeder 4		16	1
Select Feeder 5		17	1
Select Feeder 6		18	1
Select Feeder 7		19	1
Select Feeder 8		20	1
Select Feeder 9		21	1
Select Feeder 10		22	1
Vertical Stacker 1	(Seal envelope, do not meter)	23	1
Vertical Stacker 2	(Do not seal envelope, do not meter)	24	1
Vertical Stacker 3	(Overweight)	25	1
Vertical Stacker 4	(Trash)	26	1
Sealer	(0 = No Outsort, 1 = Outsort)	27	1
Meter 1	(0 = Print, 1 = No Print)	28	1
Meter 2		29	1
Customer Name		30	40
Address Line 1		70	40
Address Line 2		110	40
Address Line 3		150	40
Address Line 4		190	40
Address Line 5		230	40
Address Line 6		270	40
Zip Code		310	5
+4		315	4
+2		319	2
Return Name		321	40
Address Line 1		361	40
Address Line 2		401	40
Address Line 3		441	40
Address Line 4		481	40
Account ID		521	16
Input File Name		537	44
IMBC Codes		581	65
Service Type		646	3
IMBC SerialID		649	9
Filler		658	3
User Defined		661	29
Vendor ID		690	4
Code Name		694	5
Total Documents		699	2
End		701	1

NOTE: There is one record for each mail packet.