

DEPARTMENT OF TREASURY/ DIVISION OF REVENUE PO BOX 252 TRENTON, N J 08646-0252

TAXPAYER NAME:

OPEN SYSTEMS INTEGRATORS, INC.

ADDRESS:

289 HWY 33 BLDG E STE 3 MANALAPAN NJ 07726 EFFECTIVE DATE:

02/10/00

TRADE NAME:

SEQUENCE NUMBER:

0087952

ISSUANCE DATE:

11/09/16

New Jersey Division of Revenue

Certification

31168

## CERTIFICATE OF EMPLOYEE INFORMATION REPORT

This is to certify that the contractor listed below has submitted an Employee Information Report pursuant to N.J.A.C. 17:27-1.1 et. seq. and the State Treasurer has approved said report. This approval will remain in effect for the period of 15-AUG-2015 to 15-AUG-2022

OPEN SYSTEMS INTEGRATORS, INC. 207 D WOODWARD ROAD MANALAPAN NJ 07726 Andrew P. Sidemon-Eristoff

Andrew P. Sidamon-Eristoff
State Treasurer

#### **EXHIBIT A**

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

## GOODS, GENERAL SERVICES, AND PROFESSIONAL SERVICES CONTRACTS

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

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

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

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

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

The contractor or subcontractor agrees to make good faith efforts to meet targeted county employment goals established in accordance with N.J.A.C. 17:27-5.2.

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

The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with the principles of job related testing, as established by the statutes and court decisions of the State of New Jersey and as established by applicable Federal law and applicable Federal court decisions.

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

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

Letter of Federal Affirmative Action Plan Approval; Certificate of Employee Information Report; or
Employee Information Report Form AA-302 (electronically provided by the Division and distributed to the public agency through the Division's website at: http://www.state.nj.us/treasury/contract\_compliance/.

The contractor and its subcontractors shall furnish such reports or other documents to the Division of Purchase & Property, CCAU, EEO Monitoring Program as may be requested by the office from time to time in order to carry out the purposes of these regulations, and public agencies shall furnish such information as may be requested by the Division of Purchase & Property, CCAU, EEO Monitoring Program for conducting a compliance investigation pursuant to N.J.A.C. 17:27-1.1 et seq.

Signature: Paul Facciolo CEO Print Name: Paul Facciolo CEO

Company Name: Open Systems Integrators Ingate: May 25, 2017

## **Educational Services Commission of New Jersey Business Office**

1660 Stelton Road Piscataway, New Jersey 08854

# Chapter 271 Political Contribution Disclosure Form (Contracts that Exceed \$17,500.00) Ref. N.J.S.A. 52:34-25

The undersigned, Open Systems	being authorized and know Integrators, Inc	vledgeable of the circumstanc (Busines	es, does hereby certify that s Entity) has made the following
		`	ate or any political committee as
	Re	eportable Contributions	
Date of Contribution	Amount of Contribution	Name of Recipient Elected Official/ Committee/Candidate	<u>Name of</u> <u>Contributor</u>
The Business Ent	ity may attach additional pa	ages if needed.	
<b>☒</b> No Reportabl	le Contributions (Please cl	heck (✓) if applicable.)	
	en Systems Integrators ny elected official, politica		iness Entity) made no reportable ommittee as defined in N.J.S.A. 19:44-
Certification			
I certify, that the	information provided above	e is in full compliance with P	ublic law 2005 – Chapter 271.
Name of Authoriz	zed Agent Paul Faccio	lo	
Signature	al fails	Title	0
Business Entity _	Open Systems Integrato	ors, Inc	

#### NJ State Approved Cooperative Pricing System #65MCESCCPS

## STATEMENT OF OWNERSHIP (OWNERSHIP DISCLOSURE CERTIFICATION)

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

## This Statement Shall Be Included with All Bid and Proposal Submissions

Name of Business: Open Systems Integrators, Inc

Address of Business: 289 Hwy 33, Bldg E, Suite 3, Manalapan, NJ 07726

Name of person completing this form: Paul Facciolo CEO

N.J.S.A. 52:25-24.2:

"No corporation, partnership, or limited liability company shall be awarded any contract nor shall any agreement be entered into for the performance of any work or the furnishing of any materials or supplies, unless prior to the receipt of the bid or proposal, or accompanying the bid or proposal of said corporation, said partnership, or said limited liability company there is submitted a statement setting forth the names and addresses of all stockholders in the corporation who own 10 percent or more of its stock, of any class, or of all individual partners in the partnership who own a 10 percent or greater interest therein, or of all members in the limited liability company who own a 10 percent or greater interest therein, as the case may be.

If one or more such stockholder or partner or member is itself a corporation or partnership or limited liability company, the stockholders holding 10 percent or more of that corporation's stock, or the individual partners owning 10 percent or greater interest in that partnership, or the members owning 10 percent or greater interest in that limited liability company, as the case may be, shall also be listed. The disclosure shall be continued until names and addresses of every noncorporate stockholder, and individual partner, and member, exceeding the 10 percent ownership criteria established in this act, has been listed.

To comply with this section, a bidder with any direct or indirect parent entity which is publicly traded may submit the name and address of each publicly traded entity and the name and address of each person that holds a 10 percent or greater beneficial interest in the publicly traded entity as of the last annual filing with the federal Securities and Exchange Commission or the foreign equivalent, and, if there is any person that holds a 10 percent or greater beneficial interest, also shall submit links to the websites containing the last annual filings with the federal Securities and Exchange Commission or the foreign equivalent and the relevant page numbers of the filings that contain the information on each person that holds a 10 percent or greater beneficial interest."

The Attorney General has advised that the provisions of N.J.S.A. 52:25-24.2, which refer to corporations and partnerships, apply to limited partnerships, limited liability partnerships, and Subchapter S corporations.

#### NJ State Approved Cooperative Pricing System #65MCESCCPS

This Ownership Disclosure Certification form shall be completed, signed and notarized.

## Failure of the bidder/proposer to submit the required information is cause for automatic rejection of the bid or proposal

Part ] Check	the box that represents the type of	f business organ	ization:		
Sol	e Proprietorship (skip Parts II and II	II, sign and notar	ize at the end)		
No	n-Profit Corporation (skip Parts II a	nd III, sign and n	otarize at the end)		
Pai	rtnership Limited Partne	rship	Limited Liability Part	nership	
Lin	nited Liability Company				
X Fo	r-profit Corporation (including Subc	chapters C and S	or Professional Corp	oration)	
Otl	ner (be specific):			_	
Part l					
	I certify that the list below contain who own 10 percent or more of it who own a 10 percent or greater who own a 10 percent or greater or no individual partner in the partner in the limited liability contains.	its stock, of any interest thereir interest thereir in the corporation	class, or of all indiv n, or of all members n, as the case may k on owns 10 percent a 10 percent or gre	idual partners s in the limited be. t or more of its	in the partnership dilability company s stock, of any class, therein, or that no
	nd notarize the form below, and, nal sheets if more space is needed):	if necessary, co	mplete the list belo	ow. (Please atta	<u>ach</u>
Name:	Paul Facciolo 50%		Name: William	Baroska	50%
	S:Robbinsville, NJ		Address: Ocean,	NJ	
		-			
			Name:		
Addres	S:		Address:		
		ii.			

#### Part III - Any Direct or Indirect Parent Entity Which is Publicly Traded:

"To comply with this section, a bidder with any direct or indirect parent entity which is publicly traded may submit the name and address of each publicly traded entity and the name and address of each person that holds a 10 nercent or greater beneficial interest in the publicly traded entity as of the last appual filing with the federal

Secu or gr	curities and Exchange Commission or the foreign equivalengreater beneficial interest, also shall submit links to the wederal Securities and Exchange Commission or the foreign education the information on each person that holds a 10 person that holds a	t, and, if there is any person that holds a 10 percent bsites containing the last annual filings with the uivalent and the relevant page numbers of the filings
	Pages attached with name and address of each publicly person that holds a 10 percent or greater beneficial	
	OR	
	Submit here the links to the Websites (URLs) contain	ing the last annual filings with
	the federal Securities and Exchange Commission or the	e foreign equivalent.
	AND	
	Submit here the relevant page numbers of the filings	containing the information on
	each person holding a 10 percent or greater beneficial	interest.
		<del></del>
Subso	official seal	fiant) Paul Facciolo CEO
S A	NOTARY PUBLIC - NEW JERSEY	rporation)

See James grandens

Page 76 of 95

May 25, 2017 @ 11:00 a.m.

### (Rev. December 2014) Department of the Treasury

#### **Request for Taxpayer Identification Number and Certification**

Give Form to the requester. Do not send to the IRS.

Internal	Revenue Service			1				
	Name (as shown on your income tax return). Name is required on this line;     Open Systems Integrators, Inc	do not leave this line blank.	THE RESIDENCE OF THE PROPERTY		**************		Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, whic	Mild or commonwe
<u>.</u> :	2 Business name/disregarded entity name, if different from above		- A					HIPANIC ROBOTOR
page 2.								
s on pa	3 Check appropriate box for federal tax classification; check only one of the ☐ Individual/sole proprietor or ☐ C Corporation ☒ S Corpora	following seven boxes:	Trust/estate	4 Exemptions	ties, not	t indivi		
single-member LLC Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ►								
Print or type Specific Instructions on	Note. For a single-member LLC that is disregarded, do not check LLC; the tax classification of the single-member owner.		MARKET STATE OF THE STATE OF TH	Exemption code (if any		TCA r	eportin	ıg
Prin	Other (see instructions)			(Applies to acco	-	ained or	itside the	U.S)
cific	5 Address (number, street, and apt. or suite no.)		Requester's name	and address	(optiona	al)		
Spe	289 Hwy 33, Bldg E, Suite 3		Education		vice	s C	ommi	sion
See	6 City, state, and ZIP code Manalapan, NJ 07726		1660 Stel	500,000,000				
S	•		Piscatawa	y, NJ C	08854	1		
	7 List account number(s) here (optional)							
Par	Taxpayer Identification Number (TIN)							-
The Real Property lies	your TIN in the appropriate box. The TIN provided must match the na	ame given on line 1 to av	oid Social se	curity numbe	pr			
backu	p withholding. For individuals, this is generally your social security nu	umber (SSN). However, fo	or a			ГТ		$\overline{}$
reside	nt alien, sole proprietor, or disregarded entity, see the Part I instructions, it is your employer identification number (EIN). If you do not have a	ons on page 3. For other		-	-			
	s, it is your employer identification number (EIN). It you do not have a I page 3.	a number, see How to ge	or					
	If the account is in more than one name, see the instructions for line	1 and the chart on page		identification	n numl	oer		7
guideli	nes on whose number to enter.	rane me snar en page					1 6	Ť
			2 2	- 3 6 9	2	8	4 3	
Part						-		
	penalties of perjury, I certify that:							
	number shown on this form is my correct taxpayer identification nu							
Ser	n not subject to backup withholding because: (a) I am exempt from b vice (IRS) that I am subject to backup withholding as a result of a fail longer subject to backup withholding; and	packup withholding, or (b lure to report all interest of	) I have not been or or dividends, or (c	notified by t ) the IRS ha	the Inte	ernal fi ied m	Revenue that	ue I am
3. I an	n a U.S. citizen or other U.S. person (defined below); and							
4. The	FATCA code(s) entered on this form (if any) indicating that I am exen	npt from FATCA reportin	g is correct.					
Certifi becaus interes genera instruc	cation instructions. You must cross out item 2 above if you have be see you have failed to report all interest and dividends on your tax retu t paid, acquisition or abandonment of secured property, cancellation Illy, payments other than interest and dividends, you are not required tions on page 3.	een notified by the IRS thurn. For real estate transations to	nat you are current actions, item 2 do o an individual reti	es not apply	y. For r	mortg	age	nd
Sign Here	Signature of U.S. person ▶ Autouch	Da	te▶ 5/25/1	L7			444	and the same of th
Gen	eral Instructions	<ul> <li>Form 1098 (home moi (tuition)</li> </ul>	rtgage interest), 1098	8-E (student l	oan inte	erest),	1098-T	-
	references are to the Internal Revenue Code unless otherwise noted.	• Form 1099-C (cancele	ed debt)					
	developments. Information about developments affecting Form W-9 (such lation enacted after we release it) is at www.irs.gov/fw9.	<ul> <li>Form 1099-A (acquisit</li> </ul>	tion or abandonment	t of secured p	property	7)		
_	ose of Form	Use Form W-9 only if		on (including	a reside	ent alie	en), to	

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- · Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number
- 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See What is FATCA reporting? on page 2 for further information.



#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

5/26/2017

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

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

this certificate does not comer rights to the certificate holder in fled of such endorsement(s).						
PRODUCER John T. Costa Agency, Inc.	CONTACT NAME:	Ralph A.Costa				
P.O. Box 2338	PHONE (A/C, No, Ext):	973-835-8444	FAX (A/C, No):	973-835-3056		
2025 Hamburg TPKE Suite J Wayne, NJ 07470	E-MAIL ADDRESS:	ralph@burglaralarminsu	rance.com			
		INSURER(S) AFFORDING COVE	RAGE	NAIC#		
www.burglaralarminsurance.com	INSURER A : Sc	41297				
INSURED	INSURER B: Hartford Underwriters Insurance					
Open Systems Integrators, Inc. 289 Highway 33 Building E Suite 3	INSURER c : Sentinel Insurance Company					
Manalapan NJ 07726	INSURER D :					
	INSURER E :					
	INSURER F:					

COVERAGES

CERTIFICATE NUMBER: 35835399

REVISION NUMBER:

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

NSR LTR		ADDL SU		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
Α	✓ COMMERCIAL GENERAL LIABILITY		CPS2649590	3/31/2017	3/31/2018	EACH OCCURRENCE	\$	3,000,000`
	CLAIMS-MADE ✓ OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000
						MED EXP (Any one person)	\$	5,00
						PERSONAL & ADV INJURY	\$	3,000,00
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$	3,000,00
	POLICY / PRO- JECT LOC					PRODUCTS - COMP/OP AGG	\$	3,000,00
	OTHER:						\$	
С	AUTOMOBILE LIABILITY		13UECKH3051	3/31/2017	3/31/2018	COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,00
	_/ ANY AUTO					BODILY INJURY (Per person)	\$	
	OWNED AUTOS ONLY AUTOS ONLY AUTOS ONLY AUTOS ONLY AUTOS ONLY					BODILY INJURY (Per accident)	\$	
						PROPERTY DAMAGE (Per accident)	\$	
	AUTOS ONET AUTOS ONET						\$	
Α	✓ UMBRELLA LIAB ✓ OCCUR		CUS0001201	3/31/2017	3/31/2018	EACH OCCURRENCE	\$	8,000,00
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$	8,000,00
	DED ✓ RETENTION \$10,000						\$	
В	WORKERS COMPENSATION		13WECIJ5021	3/31/2017	3/31/2018	PER OTH- STATUTE ER		
	AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE					E.L. EACH ACCIDENT	\$	1,000,00
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)					E.L. DISEASE - EA EMPLOYEE	\$	1,000,00
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$	1,000,00
Α	ERROR & OMISSIONS		CPS2649590	3/31/2017	3/31/2018		00,00	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate holder is included as additional insured for general liability whom you are required to add as additional insured on this policy under a written contract, written agreement or written permit and subject to GLS-150s(7-06) blanket additional insured endorsement attached. W.Comp. applies to NJ,NY,CT, PA, MA, VT

CERTIFICATE HOLDER	CANCELLATION
Educational Services Commission of NJ 1660 Stelton Road Piscataway NJ 08854	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	Ralph A. Costa
	C 4000 COAF A CORD CORDODATION All sights assessed

04110511 451011

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#### STATE OF NEW JERSEY - DIVISION OF PURCHASE AND PROPERTY DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN

Quote Number: ESCNJ 17/18-19 Bidder/Offeror: Open Systems Integrators, Inc

	PART 1: CERTIFICATION  BIDDERS MUST COMPLETE PART 1 BY CHECKING EITHER BOX.						
	FAILURE TO CHECK ONE OF THE BOXES WILL RENDER THE PROPOSAL NON-RESPONSIVE.						
in m no by	ursuant to Public Law 2012, c. 25, any person or entity that submits a bid or proposal or otherwise proposes to enter into or renew a particular must complete the certification below to attest, under penalty of perjury, that neither the person or entity, nor any of its parents, absidiaries, or affiliates, is identified on the Department of Treasury's Chapter 25 list as a person or entity engaging in investment activities larn. The Chapter 25 list is found on the Division's website at <a href="http://www.state.ni.us/treasury/purchase/odf/Chapter251.ist.pdf">http://www.state.ni.us/treasury/purchase/odf/Chapter251.ist.pdf</a> . Bidders pust review this list prior to completing the below certification. Failure to complete the certification will render a bidder's proposal particular proposal proposa						
PLE	EASE CHECK THE APPROPRIATE BOX:						
X	I certify, pursuant to Public Law 2012, c. 25, that neither the bidder listed above nor any of the bidder's parents, subsidiaries, or affiliates is <u>listed</u> on the N.J. Department of the Treasury's list of entities determined to be engaged in prohibited activities in Iran pursuant to P.L. 2012, c. 25 ("Chapter 25 List"). I further certify that I am the person listed above, or I am an officer or representative of the entity listed above and am authorized to make this certification on its behalf. I will skip Part 2 and sign and complete the Certification below.						
	I am unable to certify as above because the bidder and/or one or more of its parents, subsidiaries, or affiliates is listed on the Department's Chapter 25 list. I will provide a detailed, accurate and precise description of the activities in Part 2 below and sign and complete the Certification below. Failure to provide such will result in the proposal being rendered as non-responsive and appropriate penalties, fines and/or sanctions will be assessed as provided by law.						
TI	PART 2: PLEASE PROVIDE FURTHER INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN You must provide a detailed, accurate and precise description of the activities of the bidding person/entity, or one of its parents, subsidiaries or affiliates, engaging in the investment activities in Iran outlined above by completing the boxes below.  EACH BOX WILL PROMPT YOU TO PROVIDE INFORMATION RELATIVE TO THE ABOVE QUESTIONS. PLEASE PROVIDE THOROUGH ANSWERS TO EACH QUESTION. IF YOU NEED TO MAKE ADDITIONAL ENTRIES, CLICK THE "ADD AN ADDITIONAL ACTIVITIES ENTRY" BUTTON.						
	Name Relationship to Bidder/Offeror						
	Description of Activities						
	Duration of Engagement Anticipated Cessation Date						
	Bidder/Offeror Contact Name Contact Phone Number						
L,	ADD AN ADDITIONAL ACTIVITIES ENTRY						
	ication: I, being duly sworm upon my cath, hereby represent that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I Investige: that I am authorized to execute this certification on behalf of the bidder, that the State of New Jersey is relying on the information contained herein and that I am under a						
ontinuing obligation from the date of this certification through the completion of any contracts with the State to notify the State in writing of any changes to the information contained							
	r, that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecution under the law and will constitute a material breach of my agreement(s) with the State, permitting the State to declare any contract(s) resulting from this certification void and unenforceable.						
Full	Name (Print): Open Systems Integrators, Inc Signature: July Va. 1						
	Do Not Enter PIN as a Signature						
fitle	Paul Facciolo CEO Date: May 25, 2017						

Full Na	me (Print	:Open	Systems	Integrators,	Inc	Signatur	re:		M	Vai		
								/	Do No	t Enter PIN	as a Signatur	•
Title:	Paul	Facci	olo CEO		•	Date:	May	25,	2017			

#### ACCEPTANCE OF BID And CONTRACT AWARD

## Integrated Cloud Based Building Access/Video, Critical Emergency Communications & Mobile Application Solutions

#### TO BE COMPLETED BY RESPONDENT

In compliance with the Request for Bid, the undersigned warrants that I/we have examined the Instructions to Respondents, and, being familiar with all of the conditions surrounding the proposed projects, hereby offer and agree to furnish all labor, materials, and supplies incurred in compliance with all terms, conditions. specifications and amendments in the Request for Bid and any written exceptions to the bid. Signature also certifies understanding and compliance with the certification requirements of the ESCNJ's Terms and Conditions and any special Terms and Conditions if applicable. The undersigned understands that his/her competence and responsibility and that of any proposed subcontractors, time of completion, as well as other factors of interest to the ESCNJ as stated in the evaluation section will be a consideration in making the award. Your bid for contracting services is hereby accepted. As contractor, you are now bound to sell the materials and services listed by the attached bid based upon the solicitation, including all terms, conditions, specifications, amendments as set forth in the Request for Bid. As contractor you are hereby cautioned not to commence any billable work or provide any material or service under this contract until contractor receives an executed purchase order from a Co-op Member. The parties intend this contract to constitute the final and complete agreement between the ESCNJ and contractor, and no other agreements, oral or otherwise, regarding the subject matter of this contract, shall bind any of the parties hereto. No change or modification of this contract shall be valid unless it shall be in writing and signed by both parties to this contract. If any provision of this contract is deemed invalid or illegal by any appropriate court of law, the remainder of this contract shall not be affected thereby. The term of the agreement shall commence on award and continue for one year unless terminated. canceled or extended. By mutual written agreement, the contract may be extended as permitted by law.

Company Name Open Systems Integrators, Inc	Date May 25, 2017
Company Address 289 Hwy 33, Bldg E, Suite 3 City Manalapar	State NJ Zip Code 07726
Contact PersonPaul Facciolo	Title CEO
Authorized Signature (ink only)  Pul faulo	Title

#### ACCEPTANCE OF BID AND CONTRACT AWARD BELOW TO BE COMPLETED ONLY BY ESCNJ

Awarding Agency: Educ	cational Services Commi	ssion of Ne	ew Jersey
Agency Executive:	Hatruf BA/B atrick M. Moran, SBA/B		estron.
No.		2011	
Awarded this	day of	701.	Contract Number ESCNJ 17/18-19

ESCNJ 17/18-19