## STATE OF NEW JERSEY \*\* BUSINESS REGISTRATION CERTIFICATE

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

TAXPAYER NAME:

**FOVEONICS IMAGING TECHNOLOGIES, INC.** 

ADDRESS:

310 MAIN STREET STE 6 TOMS RIVER NJ 08753-7401 EFFECTIVE DATE:

12/14/06

TRADE NAME:

SEQUENCE NUMBER:

1286738

**ISSUANCE DATE:** 

01/05/16

Director New Jersey Division of Revenue

FORM-BRC

This Certificate is NOT assignable or transferable. It must be conspicuously displayed at above address.

Certification 34623

## 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 15-0CT-2017 to 15-0CT-2024

FOVEONICS IMAGING TECHNOLOGIES 999 WILLOW GROVE ST., SUITE 3A HACKETTSTOWN NJ 07840

Fod Meadle

FORD M. SCUDDER
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 GOODS, PROFESSIONAL SERVICE AND GENERAL SERVICE CONTRACTS

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

The contractor or subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Except with respect to affectional or sexual orientation and gender identity or expression, the contractor will 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, affectional 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, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting forth provisions of this nondiscrimination clause.

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

The contractor or subcontractor 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, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices.

The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with the principles of job-related RFP #ESCNJ 16/17-48; Records Retention & Disposal Page 38 of 66 RFP Opening: 3/7/17; 11:00 a.m.

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

Employee Information Report Form AA302 (electronically provided by the Division and distributed to the public agency through the Division's website at 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 **Subchapter 10 of the Administrative Code at N.J.A.C. 17:27**.

Signatı	ire Michol	delen		
Compa	ny: FOVEOWICS	IMAGING	TECHNO	106,ES
Name	MICHAEL DE	TOMMASO		
Title	PRES.			
Date:	3-1-17			

## 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, being authorized and knowledgeable of the circumstances, does hereby certify that

defined in N.J.S.A. 19:44-20.26 during the twelve (12) months preceding this award of contract:

reportable political contributions to any elected official, political candidate or any political committee as

Reportable Contributions

(Business Entity) has made the following

Date of Contribution | Contribution | Elected Official/| Committee/Candidate | Contributor |

The Business Entity may attach additional pages if needed.

■ No Reportable Contributions (Please check (✓) if applicable.)

I certify that | Fovences | Tmas/N S (Business Entity) made no reportable contributions to any elected official, political candidate or any political committee as defined in N.J.S.A. 19:44-20.26.

Certification

I certify, that the information provided above is in full compliance with Public Law 2005—Chapter 271.

Name of Authorized Agent | Michael Detamas O |
Signature | Michael Det

## 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: FOVEONICS ZMAGING TECHNOLOGIES, INC

Address of Business: 999 WILLOW GROVE ST STE 34 HACKET TSTOWN NJ

Name of person completing this form: MICHAEL DETGMASO

#### 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 non-corporate 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.

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

Part I					
Check the box that represents the	e type of b	usiness org	anization:		
Sole Proprietorship (skip Parts	II and III, sig	gn and nota	rize at the e	nd)	
Non-Profit Corporation (skip Pa	rts II and III	, sign and n	otarize at t	he end)	
Partnership Limited Part	nership	Limited Li	ability Partı	nership	
Limited Liability Company					
For-profit Corporation (includin	g Subchapte	ers C and S	or Profession	onal Corporation	n)
Other (be specific):					
Part II					
stockholders in the corpora class, or of all individual pa greater interest therein, or o own a 10 percent or greater	rtners in thof all member interest the	e partnershers in the li	nip who ow mited liabi	n a 10 percent lity company w	or
I certify that no one stockholits stock, of any class, or no percent or greater interest to company owns a 10 percent	older in the individual herein, or t	partner in hat no men	the partner	rship owns a 10 limited liability	0 y
Sign and notarize the form belo (Please attach additional sheets if mo		_	complete	the list below.	•
		iccucuj.			
Name: MICHAEL DETGMASO	2 N	ame: WILL	LIAM L	omBars	
Address: 52 SLIKER RS	_ A	ddress: 97	48 900	EL DRIVE	
GLEN GARINER, NO OFF	26 _	ELLICOT	7 City,	MD 2104	12
Name: JOHN GAZLOW	_ N	ame:			
Address: 29 LADY'S LANE					
INIONTONN PA 15401					

#### <u>Part III -</u> 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 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."

	me and ad	name and dress of eac				•		•
		OR						1
Submit h	ere the links	s to the Webs	sites (U	RLs) con	taining t	the last a	annual	filings
the federal S	Securities an	nd Exchange	Comm	nission or	the fore	ign equi	valent.	
7, 17								
		AND						
Submit l	nere the rele	AND	umber	s of the f	filings co	ontaining	g the in	ıforma
					J		g the in	forma
		vant page n			J		g the in	forma
		vant page n			J		g the in	forma
		vant page n			J		g the in	forma
		vant page n			J		g the in	forma
		vant page n					g the in	ıforma
each pers	son holding	vant page n	or gre				g the in	forma
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each pers	son holding	vant page n	or gre	ater bene			the in	M

**New Jersey** 

My Commission Expires April 4, 2018

# Educational Services Commission of New Jersey DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN PART 1: CERTIFICATION BIDDERS MUST COMPLETE PART 1 BY CHECKING EITHER BOX.

#### Part 1

#### FAILURE TO CHECK EITHER BOX WILL RENDER THE PROPOSAL NON-RESPONSIVE.

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

#### PLEASE CHECK EITHER BOX:

subsidiaries, or affiliates is <u>listed</u> on the N.J. Department in Iran pursuant to P.L. 2012, c. 25 ("Chapter 25 List"). I further ce entity listed above and am authorized to make this certification on its OR  I am unable to certify as above because I or the bidding on the Department's Chapter 25 list. I will provide a d	er the person/entity listed above nor any of the entity's parents, of the Treasury's list of entities determined to be engaged in prohibited activities rtify that I am the person listed above, or I am an officer or representative of the s behalf. I will skip Part 2 and sign and complete the Certification gentity and/or one or more of its parents, subsidiaries, or affiliates is listed letailed, accurate and precise description of the activities in Part 2 below and ch will result in the proposal being rendered as non-responsive and appropriate
Part 2	
affiliates, engaging in the investment activities in Iran outlined above	activities of the bidding person/entity, or one of its parents, subsidiaries or e by completing the boxes below. TIONS. PLEASE PROVIDE THOROUGH ANSWERS TO EACH QUESTION.
Name:	Relationship to
Description of Activities:	Bidder/Vendor:
Duration of Engagement:	Anticipated Cessation Date
Bidder/Vendor	_
Contact Name:	_Contact Phone Number:
best of my knowledge are true and complete. I attest that I am author entity. I acknowledge that the Educational Services Commission of acknowledge that I am under a continuing obligation from the date of Services Commission of New Jersey to notify the Educational Service information contained herein. I acknowledge that I am aware that it is certification, and if I do so, I recognize that I am subject to criminal	
Title:	Date: / - ZZ ZV
Bidder/Vendor: TOVEDVICS - LOCUP	16NT SOLVTIGOS

Form (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.

IIICITIA	Tievellue del vice
	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.  TOVEDIVICS TMASING TECHNOLOGIES TNC
	2 Business name/disregarded entity name, if different from above
Je 2.	
Print or type See Specific Instructions on page	3 Check appropriate box for federal tax classification; check only one of the following seven boxes:  ☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate single-member LLC ☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ►
int	the tax classification of the single-member owner.
P IC	Other (see instructions) ► (Applies to accounts maintained outside the U.S.)  5 Address (number, street, and apt, or suite no.)
pecif	999 WILLOW GROVE ROS.
See	6 City, state, and ZIP code HACKETTS TOWN NT 07840
	7 List account number(s) here (optional)
Pai	Taxpayer Identification Number (TIN)
backi reside entitie	your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid p withholding. For individuals, this is generally your social security number (SSN). However, for a ant alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other is, it is your employer identification number (EIN). If you do not have a number, see How to get a page 3.
	n page 3.  If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for Employer identification number
	ines on whose number to enter.
Par	t II Certification
	penalties of perjury, I certify that:
1. Th	e number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
Se	m not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue rvice (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am longer subject to backup withholding; and
3. la	m a U.S. citizen or other U.S. person (defined below); and
4. Th	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.
beca intere gene	fication instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding use you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage st paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and ally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the ctions on page 3.
Sigr Her	

#### **General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

#### Purpose of Form

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)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

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 to be issued),
- 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.

OP ID: TS

#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 05/30/2017

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 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).

PRODUCER Keller Stonebraker Ins. (EC) Ellicott City Office 3458 Ellicott Ctr. Dr. Ste 104 Ellicott City, MD 21043 Eugene McCarthy		CONTACT Rugene McCarthy  PHONE (A/C, No, Ext): 410-461-0700  E-MAIL ADDRESS: mickey.mccarthy@ksiinc.com				
		INSURER(S) AFFORDING COVERAGE	NAIC #			
		INSURER A: Great Northern Insurance Col.	20303			
INSURED	Foveonics Imaging	INSURER B: Federal Insurance Co.	20281			
	Technologies, Inc. 999 Willow Grove St, 3-A	INSURER C : Chubb Group of Ins. Companies	38989			
	Hackettstown, NJ 07840	INSURER D:				
		INSURER E:				
		INSURER F:				

**COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:** 

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

INSR LTR		TYPE OF INSURANCE	ADDL INSD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S
Α	Χ	COMMERCIAL GENERAL LIABILITY					EACH OCCURRENCE	\$ 1,000,000
		CLAIMS-MADE X OCCUR		35855702	09/24/2016	09/24/2017	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000
							MED EXP (Any one person)	\$ 10,000
							PERSONAL & ADV INJURY	\$ 1,000,000
	GEN	L'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$ 2,000,000
		POLICY PRO- JECT LOC					PRODUCTS - COMP/OP AGG	\$ 1,000,000
		OTHER:						\$
	AUT	OMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
Α		ANY AUTO		35855702	09/24/2016	09/24/2017	BODILY INJURY (Per person)	\$
		ALL OWNED SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
	X	HIRED AUTOS X NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident)	\$
								\$
	X	UMBRELLA LIAB X OCCUR					EACH OCCURRENCE	\$ 2,000,00
С		EXCESS LIAB CLAIMS-MADE		79829046	09/24/2016	09/24/2017	AGGREGATE	\$ 2,000,00
		DED X RETENTION\$ 0						\$
		RKERS COMPENSATION EMPLOYERS' LIABILITY					PER OTH- STATUTE ER	
В	ANY	PROPRIETOR/PARTNER/EXECUTIVE CER/MEMBER EXCLUDED?	N/A	71718771	09/24/2016	09/24/2017	E.L. EACH ACCIDENT	\$ 500,00
	(Mar	datory in NH)	" "				E.L. DISEASE - EA EMPLOYEE	\$ 500,00
	DES	s, describe under CRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$ 500,00
Α	Erro	s or Omission		35855702	09/24/2016	09/24/2017	Aggregate	2,000,00
							Deductibl	25,00

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

Re: Document Management for Records Retention and Disposal

RFP No: ESCNJ 16-17-48

CERTIFICATE HOLDER	CANCELLATION
Educational Services Commission of New Jersey	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
1660 Stelton Road Piscataway, NJ	AUTHORIZED REPRESENTATIVE

#### RFP #: ESCNJ 16/17-48 -Document Management Services for Records Retention and Disposal

ACCEPTANCE OF RFP **And Contract Award** 

#### TO BE COMPLETED BY RESPONDENT AND SUBMITTED WITH RESPONSE

In compliance with the Request for Proposal, 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 Proposal and any written exceptions to the RFP. 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 RFP for contracting services is hereby accepted. As contractor, you are now bound to sell the materials and services listed by the attached RFP based upon the solicitation, including all terms, conditions, specifications, amendments as set forth in the Request for Proposal. 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 three years with the option to extend for one two year or two one year terms unless terminated, canceled or extended in accordance with N.J.A.C. 18A:18A-1 et. seq. by mutual written agreement.

Company Name FOVEONICS IMAGING TECHNOLOGIES Date 3-	1-17
Company Address 999 WILLOW SROVE ST. City Hack ETTS Tour State NJ Zi	p07840
Contact Person MICHAEL DETOMMASIO Title PRES	
Authorized Signature (ink only) Michel Vise lome Title MES	

#### ACCEPTANCE OF RFP AND CONTRACT AWARD TO BE COMPLETED **ONLY BY ESCNJ**

a amig i gonoj.		POLIVICOS		OI IVE VV	OCIGCY
Awarding Agency:	Educational	Services	Commission	of New	Jersey

Agency Executive: Patrick M. Moran, SBA/BS

Awarded this 2nd day of Jul 2017 Contract Number ESCNJ 16/17-48