

	ATTACHMENT I: Checklist		ARIZONA STATE RETIREMENT SYSTEM 3300 N Central Ave 14 th Floor Phoenix, AZ 85012
	ASRS Group Dental Services Solicitation Code: BPM001922 PART 2 of 2 – Attachments (Response Forms)	Page 1 of 1	

	DOCUMENT	SUBMITTED	
1.	Attachment A: Offer and Acceptance Form (Offeror has read certifications and completed required information)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
2.	Attachment B: Exceptions Exceptions Taken	<input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> NO
3.	Attachment C: Designation of Confidential, Trade Secret and Proprietary Information Offer includes responses considered to be confidential, a trade secret, or proprietary If yes, confidential responses are marked and attached as required in Uniform Instructions to Offerors, Section D(5) and Special Instructions to Offerors, Section F(2) and Section G(1)	<input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> YES <input type="checkbox"/> NA	<input type="checkbox"/> NO <input type="checkbox"/> NO <input type="checkbox"/> NO
4.	Attachment D: Questionnaire/Non Confidential Documents Attachment D1: Supplemental Information <ul style="list-style-type: none"> Organizational Chart Résumés of Key Personnel Implementation/Project Plan New Participant Welcome Kit Sample Participant Satisfaction Survey Offeror's Sample Client Reporting Package Separate Agreements Attachment D2: Confidential Documents	<input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> YES <input type="checkbox"/> NA	<input type="checkbox"/> NO <input type="checkbox"/> NO <input type="checkbox"/> NO <input type="checkbox"/> NO <input type="checkbox"/> NO <input type="checkbox"/> NO <input type="checkbox"/> NO <input type="checkbox"/> NO <input type="checkbox"/> NO
5.	Attachment E1: Pricing Schedule DHMO Attachment E2: Pricing Schedule DPPO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> YES	<input checked="" type="checkbox"/> NO <input type="checkbox"/> NO
6.	Attachment F: References	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
7.	Attachment G: Business Associate Agreement	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
8.	Attachment H: Nondisclosure Agreement	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
9.	Attachment I: Checklist	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

It is the responsibility of each Offeror to examine the entire Solicitation, seek clarification in writing (inquiries), and review the Offer for accuracy before submitting the Offer. Lack of care in preparing an Offer shall not be grounds for modifying or withdrawing the Offer after the Offer due date and time, nor shall it give rise to any Contract claim.