	PROCUREMENT DISCLOSURE STATEMENT		ARIZONA STATE RETIREMENT SYSTEM 3300 N Central Ave 14 th Floor Phoenix, AZ 85012
	ASRS Dental Services Solicitation ASRS20-	Page 1 of 5	

Dear Employee or Trustee:

You have been selected to participate in the particular procurement activity as referenced above. Your regular job duties may not include procurement activities but for the purpose of this process you may play a Significant Procurement Role, as defined in A.R.S. § 41-741 in one or more of the following:

- Participating in the development of a procurement as defined in A.R.S. § 41-2503;
- Participating in the development of an evaluation tool;
- Approving a procurement as defined in A.R.S. § 41-2503 or an evaluation tool;
- Serving as a technical advisor or an evaluator who evaluates a procurement as defined in A.R.S. § 41-2503; or
- Recommending or selecting a vendor that will provide materials, services or construction to this state.

It is essential that the integrity of the procurement process be maintained to ensure that each Offeror is given fair and equal consideration. Your familiarity with particular brands, types of equipment, material, services, individuals or firms may tend to influence your evaluation; however, you are required in this specific instance to be particularly objective and guard against any tendency that might slant your evaluation in favor of a personal preference.

Requirements

You are required to report to the Procurement Officer(s) facilitating the above referenced procurement process, any actual or potential conflict of interest as defined in A.R.S. § 38-503, § 41-753, § 41-2517, and § 41-2616C. You are also subject to the Code of Ethics set forth in Section R2-5A-501 of the Arizona Department of Administration, Personnel Division, Administrative Rules and Regulations.

An additional consideration is the legal mandate to maintain strict security and confidentiality regarding the content of any proposal, as well as the proceedings of the Evaluation Committee meetings during the evaluation process. Once the evaluation process has started, it is essential that any contact with Offerors, other than that disclosed, be through, and by, the Procurement Officer(s) facilitating the above referenced procurement.

In addition, employees or trustees, other than the Procurement Officer(s) facilitating the above referenced procurement, shall not have any communication related in any way to this particular procurement, except during formal Committee meetings, with any Offeror or potential subcontractor to that Offeror prior to award, nor shall that Member discuss the proposal or their evaluation with anyone other than the Procurement Officer(s) facilitating the above referenced procurement and Evaluation Committee Members. This is mandatory.

Before beginning any participation in a particular procurement, a person who holds a Significant Procurement Role shall:

- Sign a statement that the person has no financial interest in the procurement other than that disclosed and will have no contact with any representative of a competing Offeror related to the particular procurement during the course of evaluation of proposals, except those contacts specifically authorized by A.R.S. § 41-2534, § 41-2537, § 41-2538 and § 41-2578.
- Disclose on this statement any contact unrelated to the pending procurement that the person may need to have with a representative of a competing offeror and any contact with a representative of a competing offeror during evaluation of proposals except those contacts specifically authorized by sections A.R.S. § 41-2534, § 41-2537, § 41-2538 and § 41-2578.

A person who has been identified as having a Significant Procurement Role for this procurement and fails to disclose contact with a representative of a competing offeror or who fails to provide accurate information on this statement is subject to civil penalty of at least one thousand dollars but not more than ten thousand dollars.



PROCUREMENT DISCLOSURE STATEMENT

ASRS Dental Services
Solicitation ASRS20-

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of
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ARIZONA STATE
RETIREMENT SYSTEM
3300 N Central Ave
14th Floor
Phoenix, AZ 85012

Statements

The Undersigned attests to and agrees to abide by the following statements:

I have read and understand A.R.S. § 38-503, § 41-753, § 41-2517 and § 41-2616C and will fully comply with the requirements.

Whether recommending or selecting a vendor that will provide materials, services or construction to the State, approving a procurement or an evaluation tool or soliciting quotes greater than ten thousand dollars for the provision of materials, services or construction, I shall maintain strict security and confidentiality regarding the process and decisions to ensure fair competition.

I have not and will not communicate with any potential Offeror or vendor in preparation of specifications/scopes of work, evaluation tool or other confidential information related to the referenced procurement which would provide an unfair advantage or to prepare specifications/scopes of work which favor particular vendor(s).

I have not and will not provide insight, confidential information or assistance to any potential Offeror or vendor that might give an unfair advantage or inhibit fair competition for the referenced procurement. My input regarding the development of the solicitation documents, if any, has been and will be based solely on the State's requirements. I have not and will not communicate those requirements or confidential information to any potential Offeror or vendor.

If applicable, I have also received, read and understand the Evaluation Committee Instructions for this procurement. I will maintain all deliberations of the Evaluation Committee in strict confidence during the evaluation process. My recommendations shall be based upon an objective/subjective review of the Offeror's response and the appropriate award criteria from the solicitation in accordance with the Arizona Procurement Code.

I shall maintain strict security and confidentiality regarding the content of any proposal, as well as the proceedings of the Evaluation Committee meetings during the evaluation process that I may be a participant or attend as a committee member or a technical advisor.


I shall maintain strict security and confidentiality regarding the process or decisions regarding any protest or appeal that I am a participant, advisor or decision maker.

I know of no conflict of interest on my part nor have I committed, nor shall I commit, any indiscretion or accept any gratuities or favors that would compromise my impartiality or my responsibilities. Should a conflict of interest become known to me relevant to my role, I shall immediately disclose such conflict of interest.

I shall not receive any direct benefit from the utilization of confidential information, specifications, plans, scopes of work, or evaluation tools I prepared or assisted in the preparation of.

I shall not accept an offer of employment from or have employment discussions with any person or entity lobbying for or potentially responding to this procurement beginning on signature of the first procurement disclosure statement pertaining to this particular procurement and ending at the time of contract award. I shall not accept an offer of employment from or have employment discussions with the successful Offeror(s) and their lobbyists for one year following the purchased materials are delivered or the purchase of services or construction begins (A.R.S. § 41-753).

Upon termination of my employment with the State, for any reason, these provisions and statements remain in effect until such time as the solicitation has been successfully awarded by the State, or the State provides me a written release. These provisions and statements apply if I accept employment with any entity, its affiliates, subcontractors, or business partners that may submit an offer or are included in an offer to this

	PROCUREMENT DISCLOSURE STATEMENT		ARIZONA STATE RETIREMENT SYSTEM 3300 N Central Ave 14 th Floor Phoenix, AZ 85012
	ASRS Dental Services Solicitation ASRS20-	Page 3 of 5	


solicitation.

I understand that if I knowingly violate the terms of this Agreement, I will be subject to suspension for not less than ninety days or dismissal from State service.

The Undersigned has read and understands the above and agrees to be bound by the statements, rules and principles represented herein and in accordance with the provisions of the State statutes and rules regarding personnel, conflict of interest, confidentiality and procurement.

Please check the applicable box:

Yes ☐ No ☒ I am a State employee or trustee who was employed within the past year by a person or firm responding to a solicitation, pursuant to section 41-2517(F)


 Signature
PAUL MATSON
 Name (Print)
DIRECTOR
 Title

September 19, 2019
 Date
ASRS
 Agency
602 240 2031
 Phone



PROCUREMENT DISCLOSURE STATEMENT

ASRS Dental Services
Solicitation ASRS20-

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ARIZONA STATE
RETIREMENT SYSTEM
3300 N Central Ave
14th Floor
Phoenix, AZ 85012

Disclosures

Any information provided will be used to determine if a procurement role is appropriate and to ensure the integrity of the procurement process.

A. Outset of the Procurement (to be completed when initial meetings/work on solicitation documents begins)

SECTION ONE: POTENTIAL OFFERORS (Completed by Procurement Officer)

Delta Dental
Metlife
United Concordia
Sun Life Financial dba Union Security Insurance
Company

SECTION TWO: POSSIBLE CONFLICTS OF INTEREST (Completed by Employee or Trustee)

Instructions: Complete Section Two to identify any companies from Section One with which you have/had a substantial interest, as defined below, or professional, personal, or social relationship. It is not necessary to report firms if the relationship is strictly to conduct ordinary daily business in this section

As mandated by A.R.S. § 38-503, I have listed below all ownerships, employments, public and private affiliations and relationships held by me and/or a relative¹ which may have a substantial (pecuniary² and proprietary³) interest as defined in A.R.S. § 38-502 (11) in any contract, sale, purchase or service involving the agency. I understand that as my interests or those of my relatives change, I may need to modify this statement.

Company/Contact Name and Nature of Relationship

e.g. ABC Business – own shares

SECTION THREE: BUSINESS CONTACT (Completed by Employee or Trustee)

Instructions: Complete Section Three to identify any companies from Section One with which you have a professional relationship to conduct ordinary daily business.

During the course of my regular business, I may have contact, unrelated to this procurement, with the Potential Offerors listed below:

Company Name and Contact

e.g. XYZ LLC – J. Smith – current contractor

SUN LIFE

Signature

September 19, 2019


Date

¹ "Relative" means my spouse, child, child's child, parent, grandparent, brother or sister (of the whole or half-blood) and their spouses and the parent, brother, sister or child of my spouse.

² "Pecuniary" means money or economic or other benefits that can be valued in monetary terms

³ "Proprietary" means ownership or rights by virtue of ownership, whether public or private.

SPO Form 120 – Procurement Disclosure Statement (rev 8/2014) was utilized to provide the primary content of the ASRS form (rev 12/2015). Citations listed are available on the SPO website at www.spo.az.gov.

	PROCUREMENT DISCLOSURE STATEMENT		ARIZONA STATE RETIREMENT SYSTEM 3300 N Central Ave 14 th Floor Phoenix, AZ 85012
	ASRS Retiree Dental Insurance Solicitation Code BPM001922	Page 5 of 5	

B. After Solicitation Due Date and Time (to be completed after solicitation due date and time)

SECTION ONE: OFFERORS (Completed by Procurement Officer)

Arizona Dental Insurance Service Inc (Delta Dental)
 Union Security Insurance Co. (Sun Life)
 United Concordia Companies Inc
 Chu-Chi WangDDSP LLC
 Cigna Health Care
 Metropolitan Life Ins Co (Metlife)

SECTION TWO: POSSIBLE CONFLICTS OF INTEREST (Completed by Employee or Trustee)

Instructions: Complete Section Two to identify any companies from Section One with which you have/had a substantial interest, as defined below, or professional, personal, or social relationship. It is not necessary to report firms if the relationship is strictly to conduct ordinary daily business in this section

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Company/Contact Name and Nature of Relationship

e.g. ABC Business – own shares

SECTION THREE: BUSINESS CONTACT (Completed by Employee or Trustee)

Instructions: Complete Section Three to identify any companies from Section One with which you which you have a professional relationship to conduct ordinary daily business.

During the course of my regular business, I may have contact, unrelated to this procurement, with the Potential Offerors listed below:


Company Name

Contact Name

e.g. XYZ LLC – J. Smith – current contractor



Signature




Date

⁴ "Relative" means my spouse, child, child's child, parent, grandparent, brother or sister (of the whole or half-blood) and their spouses and the parent, brother, sister or child of my spouse.

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	PROCUREMENT DISCLOSURE STATEMENT	Page 1 of 5	ARIZONA STATE RETIREMENT SYSTEM 3300 N Central Ave 14 th Floor Phoenix, AZ 85012
	ASRS Retiree Dental Insurance Solicitation BPM001922		

Dear Employee or Trustee:

You have been selected to participate in the particular procurement activity as referenced above. Your regular job duties may not include procurement activities but for the purpose of this process you may play a Significant Procurement Role, as defined in A.R.S. § 41-741 in one or more of the following:

- Participating in the development of a procurement as defined in A.R.S. § 41-2503;
- Participating in the development of an evaluation tool;
- Approving a procurement as defined in A.R.S. § 41-2503 or an evaluation tool;
- Serving as a technical advisor or an evaluator who evaluates a procurement as defined in A.R.S. § 41-2503; or
- Recommending or selecting a vendor that will provide materials, services or construction to this state.

It is essential that the integrity of the procurement process be maintained to ensure that each Offeror is given fair and equal consideration. Your familiarity with particular brands, types of equipment, material, services, individuals or firms may tend to influence your evaluation; however, you are required in this specific instance to be particularly objective and guard against any tendency that might slant your evaluation in favor of a personal preference.

Requirements

You are required to report to the Procurement Officer(s) facilitating the above referenced procurement process, any actual or potential conflict of interest as defined in A.R.S. § 38-503, § 41-753, § 41-2517, and § 41-2616C. You are also subject to the Code of Ethics set forth in Section R2-5A-501 of the Arizona Department of Administration, Personnel Division, Administrative Rules and Regulations.


An additional consideration is the legal mandate to maintain strict security and confidentiality regarding the content of any proposal, as well as the proceedings of the Evaluation Committee meetings during the evaluation process. Once the evaluation process has started, it is essential that any contact with Offerors, other than that disclosed, be through, and by, the Procurement Officer(s) facilitating the above referenced procurement.

In addition, employees or trustees, other than the Procurement Officer(s) facilitating the above referenced procurement, shall not have any communication related in any way to this particular procurement, except during formal Committee meetings, with any Offeror or potential subcontractor to that Offeror prior to award, nor shall that Member discuss the proposal or their evaluation with anyone other than the Procurement Officer(s) facilitating the above referenced procurement and Evaluation Committee Members. This is mandatory.

Before beginning any participation in a particular procurement, a person who holds a Significant Procurement Role shall:

- Sign a statement that the person has no financial interest in the procurement other than that disclosed and will have no contact with any representative of a competing Offeror related to the particular procurement during the course of evaluation of proposals, except those contacts specifically authorized by A.R.S. § 41-2534, § 41-2537, § 41-2538 and § 41-2578.
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A person who has been identified as having a Significant Procurement Role for this procurement and fails to disclose contact with a representative of a competing offeror or who fails to provide accurate information on this statement is subject to civil penalty of at least one thousand dollars but not more than ten thousand dollars.

	PROCUREMENT DISCLOSURE STATEMENT		ARIZONA STATE RETIREMENT SYSTEM 3300 N Central Ave 14 th Floor Phoenix, AZ 85012
	ASRS Dental Services Solicitation ASRS20-	Page 2 of 5	

Statements

The Undersigned attests to and agrees to abide by the following statements:

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I have not and will not communicate with any potential Offeror or vendor in preparation of specifications/scopes of work, evaluation tool or other confidential information related to the referenced procurement which would provide an unfair advantage or to prepare specifications/scopes of work which favor particular vendor(s).

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If applicable, I have also received, read and understand the Evaluation Committee Instructions for this procurement. I will maintain all deliberations of the Evaluation Committee in strict confidence during the evaluation process. My recommendations shall be based upon an objective/subjective review of the Offeror's response and the appropriate award criteria from the solicitation in accordance with the Arizona Procurement Code.

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I shall not receive any direct benefit from the utilization of confidential information, specifications, plans, scopes of work, or evaluation tools I prepared or assisted in the preparation of.

I shall not accept an offer of employment from or have employment discussions with any person or entity lobbying for or potentially responding to this procurement beginning on signature of the first procurement disclosure statement pertaining to this particular procurement and ending at the time of contract award. I shall not accept an offer of employment from or have employment discussions with the successful Offeror(s) and their lobbyists for one year following the purchased materials are delivered or the purchase of services or construction begins (A.R.S. § 41-753).

Upon termination of my employment with the State, for any reason, these provisions and statements remain in effect until such time as the solicitation has been successfully awarded by the State, or the State provides me a written release. These provisions and statements apply if I accept employment with any entity, its affiliates, subcontractors, or business partners that may submit an offer or are included in an offer to this solicitation.


	PROCUREMENT DISCLOSURE STATEMENT		ARIZONA STATE RETIREMENT SYSTEM 3300 N Central Ave 14 th Floor Phoenix, AZ 85012
	ASRS Dental Services Solicitation ASRS20-	Page 3 of 5	

I understand that if I knowingly violate the terms of this Agreement, I will be subject to suspension for not less than ninety days or dismissal from State service.

The Undersigned has read and understands the above and agrees to be bound by the statements, rules and principles represented herein and in accordance with the provisions of the State statutes and rules regarding personnel, conflict of interest, confidentiality and procurement.

Please check the applicable box:

Yes ☒ No: ☐ am a State employee or trustee who was employed within the past year by a person or firm responding to a solicitation, pursuant to section 41-251 ?(F)


 Signature _____
 Anthony Guarino.....

9/27/19
 Date _____

Name(Print) _____

ASRS
 Agency _____

Deputy Director
 Title _____

602 568 1 7
 Phone _____



PROCUREMENT DISCLOSURE STATEMENT

ASRS Dental Services
Solicitation ASRS20-

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ARIZONA STATE
RETIREMENT SYSTEM
3300 N Central Ave
14th Floor
Phoenix, AZ 85012

Disclosures

Any information provided will be used to determine if a procurement role is appropriate and to ensure the integrity of the procurement process.

A Outset of the Procurement (to be completed when initial meetings/work on solicitation documents begins)

SECTION ONE: POTENTIAL OFFERORS (Completed by Prob. Officer)

Delta Dental
Metlife
United Concordia
Sun Life Financial dba Union Security Insurance
Company

SECTION TWO: POSSIBLE CONFLICTS OF INTEREST (Completed by Employee or Trustee)

Instructions: Complete Section Two to identify any companies from Section One with which you have had a substantial interest, as defined below, or professional, personal, or social relationship. It is not necessary to report firms if the relationship is strictly to conduct ordinary daily business in this section

As mandated by A.R.S. § 38-503, I have listed below all ownerships, employments, public and private affiliations and relationships held by me and/or a relative¹ which may have a substantial (pecuniary² and proprietary³) interest as defined in A.R.S. § 38-502 (11) in any contract, sale, purchase or service involving the agency. I understand that as my interests or those of my relatives change, I may need to modify this statement.

Company/Contact Name and Nature of Relationship

e.g. ABC Business - own shares

X NA.

SECTION THREE: BUSINESS CONTACT (Completed by Employee or Trustee)

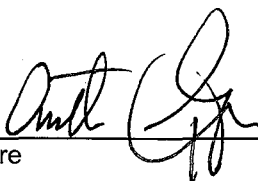
Instructions: Complete Section Three to identify any companies from Section One with which you have a professional relationship to conduct ordinary daily business.

During the course of my regular business, I may have contact, unrelated to this procurement, with the Potential Offerors listed below:

Company Name and Contact

e.g. XYZ LLC - J Smith - current contractor

}('1A

X 
Signature

10/1/19
Date

¹ "Relative" means my spouse, child, child's child, parent, grandparent, brother or sister (of the whole or half-blood) and their spouses and the parent, brother, sister or child of my spouse.

² "Pecuniary" means money or economic or other benefits that can be valued in monetary terms

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SPO Form 120 - Procurement Disclosure Statement (rev 8/2014) was utilized to provide the primary content of the ASRS form (rev 12/2015). Citations listed are available on the SPO website at www.spo.az.gov.



PROCUREMENT DISCLOSURE STATEMENT

ASRS Retiree Dental Insurance
Solicitation Code BPM001922

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ARIZONA STATE
RETIREMENT SYSTEM
3300 N Central Ave
14th Floor
Phoenix, AZ 85012

B. After Solicitation Due Date and Time (to be completed after solicitation due date and time)

SECTION ONE: OFFERORS (Completed by Procurement Officer)

Arizona Dental Insurance Service Inc (Delta Dental)
Union Security Insurance Co. (Sun Life)
United Concordia Companies Inc
Chu-Chi WangDDSP LLC
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Company/Contact Name and Nature of Relationship

e.g. ABC Business – own shares

NA

SECTION THREE: BUSINESS CONTACT (Completed by Employee or Trustee)

Instructions: Complete Section Three to identify any companies from Section One with which you have a professional relationship to conduct ordinary daily business.

During the course of my regular business, I may have contact, unrelated to this procurement, with the Potential Offerors listed below:

Company Name

Contact Name

e.g. XYZ LLC – J. Smith – current contractor

NA

Signature


Date

1/21/20

⁴ "Relative" means my spouse, child, child's child, parent, grandparent, brother or sister (of the whole or half-blood) and their spouses and the parent, brother, sister or child of my spouse.

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	<h2 style="text-align: center;">PROCUREMENT DISCLOSURE STATEMENT</h2> <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="width: 60%;"> <p>ASRS Retiree Dental Insurance</p> <p>Solicitation BPM001922</p> </div> <div style="width: 35%; text-align: right;"> <p>P g e</p> </div> </div>	<p style="text-align: center;">ARIZONA STATE RETIREMENT SYSTEM</p> <p>3300 N Central Ave 14th Floor Phoenix, AZ 85012</p>
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Dear Employee or Trustee:

You have been selected to participate in the particular procurement activity as referenced above. Your regular job duties may not include procurement activities but for the purpose of this process you may play a Significant Procurement Role, as defined in A.R.S. § 41-741 in one or more of the following:

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PROCUREMENT DISCLOSURE STATEMENT

ASRS Dental Services
Solicitation ASRS20-

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ARIZONA STATE
RETIREMENT SYSTEM
3300 N Central Ave
14th Floor
Phoenix, AZ 85012

Statements

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ASRS Dental Services
Solicitation ASRS20-

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5

ARIZONA STATE
RETIREMENT SYSTEM
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solicitation.

I understand that if I knowingly violate the terms of this Agreement, I will be subject to suspension for not less than ninety days or dismissal from State service.

The Undersigned has read and understands the above and agrees to be bound by the statements, rules and principles represented herein and in accordance with the provisions of the State statutes and rules regarding personnel, conflict of interest, confidentiality and procurement.

Please check the applicable box:

Yes ☒ No ☒ I am a State employee or trustee who was employed within the past year by a person or firm responding to a solicitation, pursuant to section 41-2517(F)

Signature

JEREMIAH SCOTT

Name (Print)

Assistant Director

Title

9-25-2019

Date

ASRS

Agency

602-300-0234

Phone



PROCUREMENT DISCLOSURE STATEMENT

ASRS Dental Services
Solicitation ASRS20-

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ARIZONA STATE
RETIREMENT SYSTEM
3300 N Central Ave
14th Floor
Phoenix, AZ 85012

Disclosures

Any information provided will be used to determine if a procurement role is appropriate and to ensure the integrity of the procurement process.

A Outset of the Procurement (to be completed when initial meetings/work on solicitation documents begins)

SECTION ONE: POTENTIAL OFFERORS (Completed by Procurement Officer)

Delta Dental
Metlife
United Concordia
Sun Life Financial dba Union Security Insurance
Company

SECTION Two: POSSIBLE CONFLICTS OF INTEREST (Completed by Employee or Trustee)

Instructions: Complete Section Two to identify any companies from Section One with which you have/had a substantial interest, as defined below, or professional, personal, or social relationship. It is not necessary to report firms if the relationship is strictly to conduct ordinary daily business in this section

As mandated by A.R.S. § 38-503, I have listed below all ownerships, employments, public and private affiliations and relationships held by me and/or a relative¹ which may have a substantial (pecuniary² and proprietary³) interest as defined in A.R.S. § 38-502 (11) in any contract, sale, purchase or service involving the agency. I understand that as my interests or those of my relatives change, I may need to modify this statement.

Company/Contact Name and Nature of Relationship

e.g. ABC Business - own shares

(v)IA.

SECTION THREE: BUSINESS CONTACT (Completed by Employee or Trustee)

Instructions: Complete Section Three to identify any companies from Section One with which you have a professional relationship to conduct ordinary daily business.

During the course of my regular business, I may have contact, unrelated to this procurement, with the Potential Offerors listed below:

Company Name and Contact

e.g. XYZ LLC - J. Smith - current contractor

Sv""(\ c , - ->SfobC.

Signature

9-25-2019

Date

¹"Relative" means my spouse, child, child's child, parent, grandparent, brother or sister (of the whole or half-blood) and their spouses and the parent, brother, sister or child of my spouse.

²"Pecuniary" means money or economic or other benefits that can be valued in monetary terms

³"Proprietary" means ownership or rights by virtue of ownership, whether public or private.



PROCUREMENT DISCLOSURE STATEMENT

ASRS Retiree Dental Insurance
Solicitation Code BPM001922

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ARIZONA STATE
RETIREMENT SYSTEM
3300 N Central Ave
14th Floor
Phoenix, AZ 85012

B. After Solicitation Due Date and Time (to be completed after solicitation due date and time)

SECTION ONE: OFFERORS (Completed by Procurement Officer)

Arizona Dental Insurance Service Inc (Delta Dental)
Union Security Insurance Co. (Sun Life)
United Concordia Companies Inc
Chu-Chi WangDDSP LLC
Cigna Health Care
Metropolitan Life Ins Co (Metlife)

SECTION TWO: POSSIBLE CONFLICTS OF INTEREST (Completed by Employee/Trustee)

Instructions: Complete Section Two to identify any companies from Section One with which you have/had a substantial interest, as defined below, or professional, personal, or social relationship. It is not necessary to report firms if the relationship is strictly to conduct ordinary daily business in this section.

As mandated by A.R.S. § 38-503, I have listed below all ownerships, employments, public and private affiliations and relationships held by me and/or a relative⁴ which may have a substantial (pecuniary⁵ and proprietary⁶) interest as defined in A.R.S. § 38-502 (11) in any contract, sale, purchase or service involving the agency. I understand that as my interests or those of my relatives change, I may need to modify this statement.

Company/Contact Name and Nature of Relationship

e.g. ABC Business - own shares

SECTION THREE: BUSINESS CONTACTS (Completed by Employee/Trustee)

Instructions: Complete Section Three to identify any companies from Section One with which you have a professional relationship to conduct ordinary daily business.

During the course of my regular business, I may have contact, unrelated to this procurement, with the Potential Offerors listed below:

/Company Name

Contact Name

e.g. XYZ LLC - J. Smith - current contractor


Signature

Date

⁴ "Relative" means my spouse, child, child's child, parent, grandparent, brother or sister (of the whole or half-blood) and their spouses and the parent, brother, sister or child of my spouse.

⁵ "Pecuniary" means money or economic or other benefits that can be valued in monetary terms.

⁶ "Proprietary" means ownership or rights by virtue of ownership, whether public or private.

	PROCUREMENT DISCLOSURE STATEMENT		ARIZONA STATE RETIREMENT SYSTEM 3300 N Central Ave 14 th Floor Phoenix, AZ 85012
	ASRS Retiree Dental Insurance Solicitation BPM001922	Page 1 of 5	

Dear Employee or Trustee:

You have been selected to participate in the particular procurement activity as referenced above. Your regular job duties may not include procurement activities but for the purpose of this process you may play a Significant Procurement Role, as defined in A.R.S. § 41-741 in one or more of the following:

- Participating in the development of a procurement as defined in A.R.S. § 41-2503;
- Participating in the development of an evaluation tool;
- Approving a procurement as defined in A.R.S. § 41-2503 or an evaluation tool;
- Serving as a technical advisor or an evaluator who evaluates a procurement as defined in A.R.S. § 41-2503; or
- Recommending or selecting a vendor that will provide materials, services or construction to this state.

It is essential that the integrity of the procurement process be maintained to ensure that each Offerer is given fair and equal consideration. Your familiarity with particular brands, types of equipment, material, services, individuals or firms may tend to influence your evaluation; however, you are required in this specific instance to be particularly objective and guard against any tendency that might slant your evaluation in favor of a personal preference.

Requirements

You are required to report to the Procurement Officer(s) facilitating the above referenced procurement process, any actual or potential conflict of interest as defined in A.R.S. § 38-503, § 41-753, § 41-2517, and § 41-2616C. You are also subject to the Code of Ethics set forth in Section R2-5A-501 of the Arizona Department of Administration, Personnel Division, Administrative Rules and Regulations.

An additional consideration is the legal mandate to maintain strict security and confidentiality regarding the content of any proposal, as well as the proceedings of the Evaluation Committee meetings during the evaluation process. Once the evaluation process has started, it is essential that any contact with Offerers, other than that disclosed, be through, and by, the Procurement Officer(s) facilitating the above referenced procurement.

In addition, employees or trustees, other than the Procurement Officer(s) facilitating the above referenced procurement, shall not have any communication related in any way to this particular procurement, except during formal Committee meetings, with any Offeror or potential subcontractor to that Offeror prior to award, nor shall that Member discuss the proposal or their evaluation with anyone other than the Procurement Officer(s) facilitating the above referenced procurement and Evaluation Committee Members. This is mandatory.

Before beginning any participation in a particular procurement, a person who holds a Significant Procurement Role shall:

- Sign a statement that the person has no financial interest in the procurement other than that disclosed and will have no contact with any representative of a competing Offerer related to the particular procurement during the course of evaluation of proposals, except those contacts specifically authorized by A.R.S. § 41-2534, § 41-2537, § 41-2538 and § 41-2578.
- Disclose on this statement any contact unrelated to the pending procurement that the person may need to have with a representative of a competing offerer and any contact with a representative of a competing offeror during evaluation of proposals except those contacts specifically authorized by sections A.R.S. § 41-2534, § 41-2537, § 41-2538 and § 41-2578.

A person who has been identified as having a Significant Procurement Role for this procurement and fails to disclose contact with a representative of a competing offeror or who fails to provide accurate information on this statement is subject to civil penalty of at least one thousand dollars but not more than ten thousand dollars.



PROCUREMENT DISCLOSURE STATEMENT

ASRS Dental Services
Solicitation ASRS20-

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ARIZONA STATE
RETIREMENT SYSTEM
3300 N Central Ave
14th Floor
Phoenix, AZ 85012

Statements

The Undersigned attests to and agrees to abide by the following statements:

I have read and understand A.R.S. § 38-503, § 41-753, § 41-2517 and § 41-2616C and will fully comply with the requirements.

Whether recommending or selecting a vendor that will provide materials, services or construction to the State, approving a procurement or an evaluation tool or soliciting quotes greater than ten thousand dollars for the provision of materials, services or construction, I shall maintain strict security and confidentiality regarding the process and decisions to ensure fair competition.

I have not and will not communicate with any potential Offeror or vendor in preparation of specifications/scopes of work, evaluation tool or other confidential information related to the referenced procurement which would provide an unfair advantage or to prepare specifications/scopes of work which favor particular vendor(s).

I have not and will not provide insight, confidential information or assistance to any potential Offeror or vendor that might give an unfair advantage or inhibit fair competition for the referenced procurement. My input regarding the development of the solicitation documents, if any, has been and will be based solely on the State's requirements. I have not and will not communicate those requirements or confidential information to any potential Offeror or vendor.

If applicable, I have also received, read and understand the Evaluation Committee Instructions for this procurement. I will maintain all deliberations of the Evaluation Committee in strict confidence during the evaluation process. My recommendations shall be based upon an objective/subjective review of the Offeror's response and the appropriate award criteria from the solicitation in accordance with the Arizona Procurement Code.

I shall maintain strict security and confidentiality regarding the content of any proposal, as well as the proceedings of the Evaluation Committee meetings during the evaluation process that I may be a participant or attend as a committee member or a technical advisor.


I shall maintain strict security and confidentiality regarding the process or decisions regarding any protest or appeal that I am a participant, advisor or decision maker.

I know of no conflict of interest on my part nor have I committed, nor shall I commit, any indiscretion or accept any gratuities or favors that would compromise my impartiality or my responsibilities. Should a conflict of interest become known to me relevant to my role, I shall immediately disclose such conflict of interest.

I shall not receive any direct benefit from the utilization of confidential information, specifications, plans, scopes of work, or evaluation tools I prepared or assisted in the preparation of.

I shall not accept an offer of employment from or have employment discussions with any person or entity lobbying for or potentially responding to this procurement beginning on signature of the first procurement disclosure statement pertaining to this particular procurement and ending at the time of contract award. I shall not accept an offer of employment from or have employment discussions with the successful Offeror(s) and their lobbyists for one year following the purchased materials are delivered or the purchase of services or construction begins (A.R.S. § 41-753).

Upon termination of my employment with the State, for any reason, these provisions and statements remain in effect until such time as the solicitation has been successfully awarded by the State, or the State provides me a written release. These provisions and statements apply if I accept employment with any entity, its affiliates, subcontractors, or business partners that may submit an offer or are included in an offer to this

	PROCUREMENT DISCLOSURE STATEMENT		ARIZONA STATE RETIREMENT SYSTEM 3300 N Central Ave 14 th Floor Phoenix, AZ 85012
	ASRS Dental Services Solicitation ASRS20-	Page 3 of 5	

solicitation.

I understand that if I knowingly violate the terms of this Agreement, I will be subject to suspension for not less than ninety days or dismissal from State service.

The Undersigned has read and understands the above and agrees to be bound by the statements, rules and principles represented herein and in accordance with the provisions of the State statutes and rules regarding personnel, conflict of interest, confidentiality and procurement.

Please check the applicable box:

Yes ☒ **NM** I am a State employee or trustee who was employed within the past year by a person or firm responding to a solicitation, pursuant to section 41-251 ?(F)

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9/19/19

Date/

.S S VI

Name (Print)

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Agency♦

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Title

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Phone

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PROCUREMENT DISCLOSURE STATEMENT

ASRS Dental Services
Solicitation ASRS20-

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ARIZONA STATE
RETIREMENT SYSTEM
3300 N Central Ave
14th Floor
Phoenix, AZ 85012

Disclosures

Any information provided will be used to determine if a procurement role is appropriate and to ensure the integrity of the procurement process.

A. Outset of the Procurement (to be completed when initial meetings/work on solicitation documents begins)

SECTION ONE: POTENTIAL OFFERORS (Completed by Procurement Officer)

Delta Dental
Metlife
United Concordia
Sun Life Financial dba Union Security Insurance
Company

SECTION Two: POSSIBLE CONFLICTS OF INTEREST (Completed by Employee or Trustee)

Instructions: Complete Section Two to identify any companies from Section One with which you have/had a substantial interest, as defined below, or professional, personal, or social relationship. It is not necessary to report firms if the relationship is strictly to conduct ordinary daily business in this section

As mandated by A.R.S. § 38-503, I have listed below all ownerships, employments, public and private affiliations and relationships held by me and/or a relative¹ which may have a substantial (pecuniary² and proprietary³) interest as defined in A.R.S. § 38-502 (11) in any contract, sale, purchase or service involving the agency. I understand that as my interests or those of my relatives change, I may need to modify this statement.

Company/Contact Name and Nature of Relationship

e.g. ABC Business - own shares

SECTION THREE: BUSINESS CONTACT (Completed by Employee or Trustee)

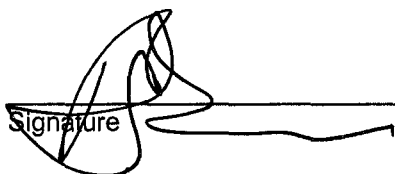
Instructions: Complete Section Three to identify any companies from Section One with which you which you have a professional relationship to conduct ordinary daily business.

During the course of my regular business, I may have contact, unrelated to this procurement, with the Potential Offerors listed below:

Company Name and Contact

e.g. XYZ LLC - J. Smith - curr/Wt contractor

Svt-1Wk Fr/Lt?-riv


Signature

9/19/19
Date

¹"Relative" means my spouse, child, child's child, parent, grandparent, brother or sister (of the whole or half-blood) and their spouses and the parent, brother, sister or child of my spouse.

²"Pecuniary" means money or economic or other benefits that can be valued in monetary terms

³"Proprietary" means ownership or rights by virtue of ownership, whether public or private.



PROCUREMENT DISCLOSURE STATEMENT

ASRS Retiree Dental Insurance
Solicitation Code BPM001922

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ARIZONA STATE
RETIREMENT SYSTEM
3300 N Central Ave
14th Floor
Phoenix, AZ 85012

B. After Solicitation Due Date and Time (to be completed after solicitation due date and time)

SECTION ONE: OFFERORS (Completed by Procurement Officer)

Arizona Dental Insurance Service Inc (Delta Dental)
Union Security Insurance Co. (Sun Life)
United Concordia Companies Inc
Chu-Chi WangDDSP LLC
Cigna Health Care
Metropolitan Life Ins Co (Metlife)

SECTION TWO: POSSIBLE CONFLICTS OF INTEREST (Completed by Employee or Trustee)

Instructions: Complete Section Two to identify any companies from Section One with which you have/had a substantial interest, as defined below, or professional, personal, or social relationship. It is not necessary to report firms if the relationship is strictly to conduct ordinary daily business in this section

As mandated by A.R.S. § 38-503, I have listed below all ownerships, employments, public and private affiliations and relationships held by me and/or a relative⁴ which may have a substantial (pecuniary⁵ and proprietary⁶) interest as defined in A.R.S. § 38-502 (11) in any contract, sale, purchase or service involving the agency. I understand that as my interests or those of my relatives change, I may need to modify this statement.

Company/Contact Name and Nature of Relationship

e.g. ABC Business – own shares

SECTION THREE: BUSINESS CONTACT (Completed by Employee or Trustee)

Instructions: Complete Section Three to identify any companies from Section One with which you have a professional relationship to conduct ordinary daily business.

During the course of my regular business, I may have contact, unrelated to this procurement, with the Potential Offerors listed below:

Company Name

Contact Name

e.g. XYZ LLC – J. Smith – current contractor

*Sun Life – various individuals w/
current contractor*


Signature

Date

⁴ "Relative" means my spouse, child, child's child, parent, grandparent, brother or sister (of the whole or half-blood) and their spouses and the parent, brother, sister or child of my spouse.

⁵ "Pecuniary" means money or economic or other benefits that can be valued in monetary terms

⁶ "Proprietary" means ownership or rights by virtue of ownership, whether public or private.

	<h2 style="text-align: center;">PROCUREMENT DISCLOSURE STATEMENT</h2> <p>ASRS Retiree Dental Insurance Solicitation BPM001922</p>	<p style="text-align: center;">ARIZONA STATE RETIREMENT SYSTEM 3300 N Central Ave 14th Floor Phoenix, AZ 85012</p> <p style="text-align: center;">Page 1 of 5</p>
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Dear Employee or Trustee:

You have been selected to participate in the particular procurement activity as referenced above. Your regular job duties may not include procurement activities but for the purpose of this process you may play a Significant Procurement Role, as defined in A.R.S. § 41-741 in one or more of the following:

- Participating in the development of a procurement as defined in A.R.S. § 41-2503;
- Participating in the development of an evaluation tool;
- Approving a procurement as defined in A.R.S. § 41-2503 or an evaluation tool;
- Serving as a technical advisor or an evaluator who evaluates a procurement as defined in A.R.S. § 41-2503; or
- Recommending or selecting a vendor that will provide materials, services or construction to this state.

It is essential that the integrity of the procurement process be maintained to ensure that each Offeror is given fair and equal consideration. Your familiarity with particular brands, types of equipment, material, services, individuals or firms may tend to influence your evaluation; however, you are required in this specific instance to be particularly objective and guard against any tendency that might slant your evaluation in favor of a personal preference.

Requirements

You are required to report to the Procurement Officer(s) facilitating the above referenced procurement process, any actual or potential conflict of interest as defined in A.R.S. § 38-503, § 1-753, § 41-2517, and § 41-2616C. You are also subject to the Code of Ethics set forth in Section R2-5A-501 of the Arizona Department of Administration, Personnel Division, Administrative Rules and Regulations.


An additional consideration is the legal mandate to maintain strict security and confidentiality regarding the content of any proposal, as well as the proceedings of the Evaluation Committee meetings during the evaluation process. Once the evaluation process has started, it is essential that any contact with Offerors, other than that disclosed, be through, and by, the Procurement Officer(s) facilitating the above referenced procurement.

In addition, employees or trustees, other than the Procurement Officer(s) facilitating the above referenced procurement, shall not have any communication related in any way to this particular procurement, except during formal Committee meetings, with any Offeror or potential subcontractor to that Offeror prior to award, nor shall that Member discuss the proposal or their evaluation with anyone other than the Procurement Officer(s) facilitating the above referenced procurement and Evaluation Committee Members. This is mandatory.

Before beginning any participation in a particular procurement, a person who holds a Significant Procurement Role shall:

- Sign a statement that the person has no financial interest in the procurement other than that disclosed and will have no contact with any representative of a competing Offeror related to the particular procurement during the course of evaluation of proposals, except those contacts specifically authorized by A.R.S. § 41-2534, § 41-2537, § 41-2538 and § 41-2578.
- Disclose on this statement any contact unrelated to the pending procurement that the person may need to have with a representative of a competing offeror and any contact with a representative of a competing offeror during evaluation of proposals except those contacts specifically authorized by sections A.R.S. § 41-2534, § 41-2537, § 41-2538 and § 41-2578.

A person who has been identified as having a Significant Procurement Role for this procurement and fails to disclose contact with a representative of a competing offeror or who fails to provide accurate information on this statement is subject to civil penalty of at least one thousand dollars but not more than ten thousand dollars.

	PROCUREMENT DISCLOSURE STATEMENT		ARIZONA STATE RETIREMENT SYSTEM 3300 N Central Ave 14 th Floor Phoenix, AZ 85012
	ASRS Dental Services Solicitation ASRS20-	Page 2 of 5	

Statements

The Undersigned attests to and agrees to abide by the following statements:

I have read and understand A.R.S. § 38-503, § 41-753, § 41-2517 and § 41-2616C and will fully comply with the requirements.

Whether recommending or selecting a vendor that will provide materials, services or construction to the State, approving a procurement or an evaluation tool or soliciting quotes greater than ten thousand dollars for the provision of materials, services or construction, I shall maintain strict security and confidentiality regarding the process and decisions to ensure fair competition.

I have not and will not communicate with any potential Offeror or vendor in preparation of specifications/scopes of work, evaluation tool or other confidential information related to the referenced procurement which would provide an unfair advantage or to prepare specifications/scopes of work which favor particular vendor(s).

I have not and will not provide insight, confidential information or assistance to any potential Offeror or vendor that might give an unfair advantage or inhibit fair competition for the referenced procurement. My input regarding the development of the solicitation documents, if any, has been and will be based solely on the State's requirements. I have not and will not communicate those requirements or confidential information to any potential Offeror or vendor.

If applicable, I have also received, read and understand the Evaluation Committee Instructions for this procurement. I will maintain all deliberations of the Evaluation Committee in strict confidence during the evaluation process. My recommendations shall be based upon an objective/subjective review of the Offeror's response and the appropriate award criteria from the solicitation in accordance with the Arizona Procurement Code.

I shall maintain strict security and confidentiality regarding the content of any proposal, as well as the proceedings of the Evaluation Committee meetings during the evaluation process that I may be a participant or attend as a committee member or a technical advisor.

I shall maintain strict security and confidentiality regarding the process or decisions regarding any protest or appeal that I am a participant, advisor or decision maker.

I know of no conflict of interest on my part nor have I committed, nor shall I commit, any indiscretion or accept any gratuities or favors that would compromise my impartiality or my responsibilities. Should a conflict of interest become known to me relevant to my role, I shall immediately disclose such conflict of interest.

I shall not receive any direct benefit from the utilization of confidential information, specifications, plans, scopes of work, or evaluation tools I prepared or assisted in the preparation of.

I shall not accept an offer of employment from or have employment discussions with any person or entity lobbying for or potentially responding to this procurement beginning on signature of the first procurement disclosure statement pertaining to this particular procurement and ending at the time of contract award. I shall not accept an offer of employment from or have employment discussions with the successful Offeror(s) and their lobbyists for one year following the purchased materials are delivered or the purchase of services or construction begins (A.R.S. § 41-753).

Upon termination of my employment with the State, for any reason, these provisions and statements remain in effect until such time as the solicitation has been successfully awarded by the State, or the State provides me a written release. These provisions and statements apply if I accept employment with any entity, its affiliates, subcontractors, or business partners that may submit an offer or are included in an offer to this



PROCUREMENT DISCLOSURE STATEMENT

ASRS Dental Services
Solicitation ASRS20-

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ARIZONA STATE
RETIREMENT SYSTEM
3300 N Central Ave
14th Floor
Phoenix, AZ 85012

solicitation.

I understand that if I knowingly violate the terms of this Agreement, I will be subject to suspension for not less than ninety days or dismissal from State service.

The Undersigned has read and understands the above and agrees to be bound by the statements, rules and principles represented herein and in accordance with the provisions of the State statutes and rules regarding personnel, conflict of interest, confidentiality and procurement.

Please check the applicable box:

Yes ☒ No ☐ I am a State employee or trustee who was employed within the past year by a person or firm responding to a solicitation, pursuant to section 41-2517(F)


Signature

David King
Name (Print)

Assistant Director, Chief Information Officer
Title

9/23/19
Date

Arizona State Retirement System
Agency

602/240-2007 ____
Phone



PROCUREMENT DISCLOSURE STATEMENT

ASRS Dental Services
Solicitation ASRS20-

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of
5

ARIZONA STATE
RETIREMENT SYSTEM
3300 N Central Ave
14th Floor
Phoenix, AZ 85012

Disclosures

Any information provided will be used to determine if a procurement role is appropriate and to ensure the integrity of the procurement process.

A. **Outset of the Procurement** (*to be completed when initial meetings/work on solicitation documents begins*)

SECTION ONE: POTENTIAL OFFERORS (*Completed by Procurement Officer*)

Delta Dental
Metlife
United Concordia
Sun Life Financial dba Union Security Insurance
Company

SECTION TWO: POSSIBLE CONFLICTS OF INTEREST (*Completed by Employee or Trustee*)

Instructions: Complete Section Two to identify any companies from Section One with which you have/had a substantial interest, as defined below, or professional, personal, or social relationship. It is not necessary to report firms if the relationship is strictly to conduct ordinary daily business in this section

As mandated by A.R.S. § 38-503, I have listed below all ownerships, employments, public and private affiliations and relationships held by me and/or a relative¹ which may have a substantial (pecuniary² and proprietary³) interest as defined in A.R.S. § 38-502 (11) in any contract, sale, purchase or service involving the agency. I understand that as my interests or those of my relatives change, I may need to modify this statement.

I Company/Contact Name and Nature of Relationship

e.g. ABC Business - own shares

None

SECTION THREE: BUSINESS CONTACT (*Completed by Employee or Trustee*)

Instructions: Complete Section Three to identify any companies from Section One with which you have a professional relationship to conduct ordinary daily business.

During the course of my regular business, I may have contact, unrelated to this procurement, with the Potential Offerors listed below:

I Company Name and Contact

e.g. XYZ LLC - J. Smith - current contractor

SunLife Financial, who is the current vendor with ASRS for dental plans

Signature

Date


9/23/19

¹"Relative" means my spouse, child, child's child, parent, grandparent, brother or sister (of the whole or half-blood) and their spouses and the parent, brother, sister or child of my spouse.

²"Pecuniary" means money or economic or other benefits that can be valued in monetary terms

³"Proprietary" means ownership or rights by virtue of ownership, whether public or private.

SFO Form 120 - Procurement Disclosure Statement (rev 8/2014) was utilized to provide the primary content of the ASRS form (rev 12/2015). Citations listed are available on the SFO website at www.spo.az.gov.

	PROCUREMENT DISCLOSURE STATEMENT		ARIZONA STATE RETIREMENT SYSTEM 3300 N Central Ave 14 th Floor Phoenix, AZ 85012
	ASRS Retiree Dental Insurance Solicitation Code BPM001922	Page 5 of 5	

B. After Solicitation Due Date and Time (to be completed after solicitation due date and time)

SECTION ONE: OFFERORS (Completed by Procurement Officer)

Arizona Dental Insurance Service Inc (Delta Dental)
 Union Security Insurance Co. (Sun Life)
 United Concordia Companies Inc
 Chu-Chi WangDDSP LLC
 Cigna Health Care
 Metropolitan Life Ins Co (Metlife)

SECTION TWO: POSSIBLE CONFLICTS OF INTEREST (Completed by Employee or Trustee)

Instructions: Complete Section Two to identify any companies from Section One with which you have/had a substantial interest, as defined below, or professional, personal, or social relationship. It is not necessary to report firms if the relationship is strictly to conduct ordinary daily business in this section

As mandated by A.R.S. § 38-503, I have listed below all ownerships, employments, public and private affiliations and relationships held by me and/or a relative⁴ which may have a substantial (pecuniary⁵ and proprietary⁶) interest as defined in A.R.S. § 38-502 (11) in any contract, sale, purchase or service involving the agency. I understand that as my interests or those of my relatives change, I may need to modify this statement.

Company/Contact Name and Nature of Relationship

e.g. ABC Business – own shares

N/A

SECTION THREE: BUSINESS CONTACT (Completed by Employee or Trustee)

Instructions: Complete Section Three to identify any companies from Section One with which you which you have a professional relationship to conduct ordinary daily business.

During the course of my regular business, I may have contact, unrelated to this procurement, with the Potential Offerors listed below:

Company Name


Contact Name

e.g. XYZ LLC – J. Smith – current contractor

Signature

Date

⁴ "Relative" means my spouse, child, child's child, parent, grandparent, brother or sister (of the whole or half-blood) and their spouses and the parent, brother, sister or child of my spouse.
⁵ "Pecuniary" means money or economic or other benefits that can be valued in monetary terms
⁶ "Proprietary" means ownership or rights by virtue of ownership, whether public or private.

	PROCUREMENT DISCLOSURE STATEMENT		ARIZONA STATE RETIREMENT SYSTEM 3300 N Central Ave 14 th Floor Phoenix, AZ 85012
	ASRS Retiree Dental Insurance Solicitation Code BPM001922	Page 1 of 5	

Dear Employee or Trustee:

You have been selected to participate in the particular procurement activity as referenced above. Your regular job duties may not include procurement activities but for the purpose of this process you may play a Significant Procurement Role, as defined in A.R.S. § 41-741 in one or more of the following:

- Participating in the development of a procurement as defined in A.R.S. § 41-2503;
- Participating in the development of an evaluation tool;
- Approving a procurement as defined in A.R.S. § 41-2503 or an evaluation tool;
- Serving as a technical advisor or an evaluator who evaluates a procurement as defined in A.R.S. § 41-2503; or
- Recommending or selecting a vendor that will provide materials, services or construction to this state.

It is essential that the integrity of the procurement process be maintained to ensure that each Offeror is given fair and equal consideration. Your familiarity with particular brands, types of equipment, material, services, individuals or firms may tend to influence your evaluation; however, you are required in this specific instance to be particularly objective and guard against any tendency that might slant your evaluation in favor of a personal preference.

Requirements

You are required to report to the Procurement Officer(s) facilitating the above referenced procurement process, any actual or potential conflict of interest as defined in A.R.S. § 38-503, § 41-753, § 41-2517, and § 41-2616C. You are also subject to the Code of Ethics set forth in Section R2-5A-501 of the Arizona Department of Administration, Personnel Division, Administrative Rules and Regulations.

An additional consideration is the legal mandate to maintain strict security and confidentiality regarding the content of any proposal, as well as the proceedings of the Evaluation Committee meetings during the evaluation process. Once the evaluation process has started, it is essential that any contact with Offerors, other than that disclosed, be through, and by, the Procurement Officer(s) facilitating the above referenced procurement.

In addition, employees or trustees, other than the Procurement Officer(s) facilitating the above referenced procurement, shall not have any communication related in any way to this particular procurement, except during formal Committee meetings, with any Offeror or potential subcontractor to that Offeror prior to award, nor shall that Member discuss the proposal or their evaluation with anyone other than the Procurement Officer(s) facilitating the above referenced procurement and Evaluation Committee Members. This is mandatory.

Before beginning any participation in a particular procurement, a person who holds a Significant Procurement Role shall:

- Sign a statement that the person has no financial interest in the procurement other than that disclosed and will have no contact with any representative of a competing Offeror related to the particular procurement during the course of evaluation of proposals, except those contacts specifically authorized by A.R.S. § 41-2534, § 41-2537, § 41-2538 and § 41-2578.
- Disclose on this statement any contact unrelated to the pending procurement that the person may need to have with a representative of a competing offeror and any contact with a representative of a competing offeror during evaluation of proposals except those contacts specifically authorized by sections A.R.S. § 41-2534, § 41-2537, § 41-2538 and § 41-2578.

A person who has been identified as having a Significant Procurement Role for this procurement and fails to disclose contact with a representative of a competing offeror or who fails to provide accurate information on this statement is subject to civil penalty of at least one thousand dollars but not more than ten thousand dollars.



PROCUREMENT DISCLOSURE STATEMENT

ASRS Retiree Dental Insurance
Solicitation Code BPM001922

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ARIZONA STATE
RETIREMENT SYSTEM
3300 N Central Ave
14th Floor
Phoenix, AZ 85012

Statements

The Undersigned attests to and agrees to abide by the following statements:

I have read and understand A.R.S. § 38-503, § 41-753, § 41-2517 and § 41-2616C and will fully comply with the requirements.

Whether recommending or selecting a vendor that will provide materials, services or construction to the State, approving a procurement or an evaluation tool or soliciting quotes greater than ten thousand dollars for the provision of materials, services or construction, I shall maintain strict security and confidentiality regarding the process and decisions to ensure fair competition.

I have not and will not communicate with any potential Offeror or vendor in preparation of specifications/scopes of work, evaluation tool or other confidential information related to the referenced procurement which would provide an unfair advantage or to prepare specifications/scopes of work which favor particular vendor(s).

I have not and will not provide insight, confidential information or assistance to any potential Offeror or vendor that might give an unfair advantage or inhibit fair competition for the referenced procurement. My input regarding the development of the solicitation documents, if any, has been and will be based solely on the State's requirements. I have not and will not communicate those requirements or confidential information to any potential Offeror or vendor.

If applicable, I have also received, read and understand the Evaluation Committee Instructions for this procurement. I will maintain all deliberations of the Evaluation Committee in strict confidence during the evaluation process. My recommendations shall be based upon an objective/subjective review of the Offeror's response and the appropriate award criteria from the solicitation in accordance with the Arizona Procurement Code.

I shall maintain strict security and confidentiality regarding the content of any proposal, as well as the proceedings of the Evaluation Committee meetings during the evaluation process that I may be a participant or attend as a committee member or a technical advisor.

I shall maintain strict security and confidentiality regarding the process or decisions regarding any protest or appeal that I am a participant, advisor or decision maker.

I know of no conflict of interest on my part nor have I committed, nor shall I commit, any indiscretion or accept any gratuities or favors that would compromise my impartiality or my responsibilities. Should a conflict of interest become known to me relevant to my role, I shall immediately disclose such conflict of interest.

I shall not receive any direct benefit from the utilization of confidential information, specifications, plans, scopes of work, or evaluation tools I prepared or assisted in the preparation of.

I shall not accept an offer of employment from or have employment discussions with any person or entity lobbying for or potentially responding to this procurement beginning on signature of the first procurement disclosure statement pertaining to this particular procurement and ending at the time of contract award. I shall not accept an offer of employment from or have employment discussions with the successful Offeror(s) and their lobbyists for one year following the purchased materials are delivered or the purchase of services or construction begins (A.R.S. § 41-753).

Upon termination of my employment with the State, for any reason, these provisions and statements remain in effect until such time as the solicitation has been successfully awarded by the State, or the State provides me a written release. These provisions and statements apply if I accept employment with any entity, its affiliates, subcontractors, or business partners that may submit an offer or are included in an offer to this solicitation.



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ASRS Retiree Dental Insurance
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Phoenix, AZ 85012

I understand that if I knowingly violate the terms of this Agreement, I will be subject to suspension for not less than ninety days or dismissal from State service.

The Undersigned has read and understands the above and agrees to be bound by the statements, rules and principles represented herein and in accordance with the provisions of the State statutes and rules regarding personnel, conflict of interest, confidentiality and procurement.

Please check the applicable box:

Yes ☐ No ☒ I am a State employee or trustee who was employed within the past year by a person or firm responding to a solicitation, pursuant to section 41-2517(F)

Randi Gray
Signature

Randi Gray
Name (Print)

Health and Disability Plan manager
Title

1/27/2020
Date

ASRS
Agency

602-308-5156
Phone



PROCUREMENT DISCLOSURE STATEMENT

ASRS Retiree Dental Insurance
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Disclosures

Any information provided will be used to determine if a procurement role is appropriate and to ensure the integrity of the procurement process.

A. Outset of the Procurement (to be completed when initial meetings/work on solicitation documents begins)

SECTION ONE: POTENTIAL OFFERORS (Completed by Procurement Officer)

Delta Dental
Metlife
United Concordia
Sun Life Financial dba Union Security Insurance Company

SECTION TWO: POSSIBLE CONFLICTS OF INTEREST (Completed by Employee or Trustee)

Instructions: Complete Section Two to identify any companies from Section One with which you have/had a substantial interest, as defined below, or professional, personal, or social relationship. It is not necessary to report firms if the relationship is strictly to conduct ordinary daily business in this section

As mandated by A.R.S. § 38-503, I have listed below all ownerships, employments, public and private affiliations and relationships held by me and/or a relative¹ which may have a substantial (pecuniary² and proprietary³) interest as defined in A.R.S. § 38-502 (11) in any contract, sale, purchase or service involving the agency. I understand that as my interests or those of my relatives change, I may need to modify this statement.

Company/Contact Name and Nature of Relationship

e.g. ABC Business – own shares

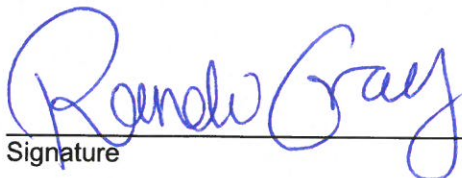
SECTION THREE: BUSINESS CONTACT (Completed by Employee or Trustee)

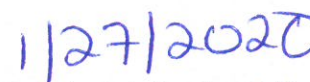
Instructions: Complete Section Three to identify any companies from Section One with which you have a professional relationship to conduct ordinary daily business.

During the course of my regular business, I may have contact, unrelated to this procurement, with the Potential Offerors listed below:

Company Name and Contact

e.g. XYZ LLC – J. Smith – current contractor


Signature


Date

¹ "Relative" means my spouse, child, child's child, parent, grandparent, brother or sister (of the whole or half-blood) and their spouses and the parent, brother, sister or child of my spouse.

² "Pecuniary" means money or economic or other benefits that can be valued in monetary terms

³ "Proprietary" means ownership or rights by virtue of ownership, whether public or private.

SPO Form 120 – Procurement Disclosure Statement (rev 8/2014) was utilized to provide the primary content of the ASRS form (rev 12/2015). Citations listed are available on the SPO website at www.spo.az.gov.



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B. After Solicitation Due Date and Time (to be completed after solicitation due date and time)

SECTION ONE: OFFERORS (Completed by Procurement Officer)

Arizona Dental Insurance Service Inc (Delta Dental)
Union Security Insurance Co. (Sun Life)
United Concordia Companies Inc
Chu-Chi WangDDSP LLC
Cigna Health Care
Metropolitan Life Ins Co (Metlife)

SECTION TWO: POSSIBLE CONFLICTS OF INTEREST (Completed by Employee or Trustee)

Instructions: Complete Section Two to identify any companies from Section One with which you have/had a substantial interest, as defined below, or professional, personal, or social relationship. It is not necessary to report firms if the relationship is strictly to conduct ordinary daily business in this section

As mandated by A.R.S. § 38-503, I have listed below all ownerships, employments, public and private affiliations and relationships held by me and/or a relative⁴ which may have a substantial (pecuniary⁵ and proprietary⁶) interest as defined in A.R.S. § 38-502 (11) in any contract, sale, purchase or service involving the agency. I understand that as my interests or those of my relatives change, I may need to modify this statement.

Company/Contact Name and Nature of Relationship

e.g. ABC Business – own shares

SECTION THREE: BUSINESS CONTACT (Completed by Employee or Trustee)

Instructions: Complete Section Three to identify any companies from Section One with which you have a professional relationship to conduct ordinary daily business.

During the course of my regular business, I may have contact, unrelated to this procurement, with the Potential Offerors listed below:

Company Name

Contact Name

e.g. XYZ LLC – J. Smith – current contractor

Signature

Randy Gray

Date

1/27/2020

⁴ "Relative" means my spouse, child, child's child, parent, grandparent, brother or sister (of the whole or half-blood) and their spouses and the parent, brother, sister or child of my spouse.

⁵ "Pecuniary" means money or economic or other benefits that can be valued in monetary terms

⁶ "Proprietary" means ownership or rights by virtue of ownership, whether public or private.



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3300 N Central Ave
14th Floor
Phoenix, AZ 85012

Dear Committee Member or Technical Resource:

You have been selected to participate in the particular procurement activity as referenced above. Your selection was based upon your technical knowledge and expertise in this area and your ability to develop an objective analysis of each Offer.

It is essential that the integrity of the procurement process be maintained to insure that each Offeror is given fair and equal consideration. Your familiarity with particular services, individuals, firms, brands, types of equipment, or material may tend to influence your evaluation; however, you are required in this specific instance to be particularly objective and guard against any tendency that might slant your evaluation in favor of a personal preference.

An additional consideration is the legal mandate to maintain strict security and confidentiality regarding the content of any Offer, as well as the proceedings of the Evaluation Committee meetings during the evaluation process. Once the evaluation process has started, it is essential that any contact with Offerors, other than that disclosed, be through, and by, the Procurement Officer(s) facilitating the above referenced procurement.

In addition, Committee Members or Technical Resources shall not have any communication related in any way to this particular procurement, except during formal Committee meetings, with any Offeror or potential subcontractor to that Offeror prior to award, and shall not discuss the Offer or the evaluation with anyone other than the Procurement Officer(s) facilitating the above referenced procurement and Evaluation Committee Members.

You are required to report to the Procurement Officer(s) facilitating the above referenced procurement process, any actual or potential conflict of interest as defined in A.R.S. § 38-503, § 41-753, § 41-2517, and § 41-2616(C).

Statements


The Undersigned attests to and agrees to abide by the following statements:

I have read and understand A.R.S. § 38-503, § 41-753, § 41-2517 and § 41-2616(C) and will fully comply with the requirements.

Whether recommending or selecting a vendor that will provide materials, services or construction to the State, or approving a procurement or an evaluation tool for the provision of materials, services or construction, I shall maintain strict security and confidentiality regarding the process and decisions to ensure fair competition.

I have not and will not communicate with any potential Offeror or vendor in preparation of specifications/scopes of work, evaluation tool or other confidential information related to the referenced procurement which would provide an unfair advantage or to prepare specifications/scopes of work which favor particular vendor(s).

I have not and will not provide insight, confidential information or assistance to any potential Offeror or vendor that might give an unfair advantage or inhibit fair competition for the referenced procurement. My input regarding the development of the solicitation documents, if any, has been and will be based solely on the State's requirements. I have not and will not communicate those

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requirements or confidential information to any potential Offeror or vendor.

I shall maintain strict security and confidentiality regarding the content of any Offer, as well as the proceedings of the Evaluation Committee meetings during the evaluation process that I may be a participant or attend as a committee member or a technical advisor. My recommendations shall be based upon a review of the Offeror's response and the appropriate evaluation criteria from the solicitation in accordance with the Arizona Procurement Code.

I know of no conflict of interest on my part nor have I committed, nor shall I commit, any indiscretion or accept any gratuities or favors that would compromise my impartiality or my responsibilities. Should a conflict of interest become known to me relevant to my role, I shall immediately disclose such conflict of interest.

The Undersigned has read and understands the above and agrees to be bound by the statements, rules and principles represented herein and in accordance with the provisions of the State statutes and rules regarding conflict of interest, confidentiality and procurement.

Barbara J. Weber
 Signature
Barbara J. Weber
 Name (Print)
AASRA Health and
 Title Wellness Chair

10-17-19
 Date
All Arizona School
 Organization Retiree Assoc.
602-799-1800
 Phone



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Disclosures

Any information provided will be used to determine if a procurement role is appropriate and to ensure the integrity of the procurement process.

A. Outset of the Procurement (to be completed when initial meetings/work on solicitation documents begins)

SECTION ONE: POTENTIAL OFFERORS (Completed by Procurement Officer)

Delta Dental
Metlife
United Concordia
Sun Life Financial dba Union Security Insurance Company

SECTION TWO: POSSIBLE CONFLICTS OF INTEREST (Completed by Committee Member or Technical Resource)

Instructions: Complete Section Two to identify any companies from Section One with which you have/had a substantial interest, as defined below, or professional, personal, or social relationship. It is not necessary to report firms if the relationship is strictly to conduct ordinary daily business in this section

As mandated by A.R.S. § 38-503, I have listed below all ownerships, employments, public and private affiliations and relationships held by me and/or a relative¹ which may have a substantial (pecuniary² and proprietary³) interest as defined in A.R.S. § 38-502 (11) in any contract, sale, purchase or service involving the agency. I understand that as my interests or those of my relatives change, I may need to modify this statement.

Company/Contact Name and Nature of Relationship

e.g. ABC Business – own shares

none

SECTION THREE: BUSINESS CONTACT (Completed by Committee Member or Technical Resource)

Instructions: Complete Section Three to identify any companies from Section One with which you have a professional relationship to conduct ordinary daily business.

During the course of my regular business, I may have contact, unrelated to this procurement, with the Potential Offerors listed below:

Company Name and Contact

e.g. XYZ LLC – J. Smith – current contractor

none

Barbara J. Weber
Signature

10-17-19
Date

¹ "Relative" means my spouse, child, child's child, parent, grandparent, brother or sister (of the whole or half-blood) and their spouses and the parent, brother, sister or child of my spouse.

² "Pecuniary" means money or economic or other benefits that can be valued in monetary terms

³ "Proprietary" means ownership or rights by virtue of ownership, whether public or private.

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ASRS Retiree Dental Insurance
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RETIREMENT SYSTEM
3300 N Central Ave
14th Floor
Phoenix, AZ 85012

B. After Solicitation Due Date and Time (to be completed after solicitation due date and time)

SECTION ONE: OFFERORS (Completed by Procurement Officer)

Arizona Dental Insurance Service Inc (Delta Dental)
Union Security Insurance Co. (Sun Life)
United Concordia Companies Inc
Chu-Chi Wang DDSP LLC
Cigna Health Care
Metropolitan Life Ins Co (Metlife)

SECTION TWO: POSSIBLE CONFLICTS OF INTEREST (Completed by Committee Member or Technical Resource)

Instructions: Complete Section Two to identify any companies from Section One with which you have/had a substantial interest, as defined below, or professional, personal, or social relationship. It is not necessary to report firms if the relationship is strictly to conduct ordinary daily business in this section

As mandated by A.R.S. § 38-503, I have listed below all ownerships, employments, public and private affiliations and relationships held by me and/or a relative⁴ which may have a substantial (pecuniary⁵ and proprietary⁶) interest as defined in A.R.S. § 38-502 (11) in any contract, sale, purchase or service involving the agency. I understand that as my interests or those of my relatives change, I may need to modify this statement.

Company/Contact Name and Nature of Relationship

e.g. ABC Business – own shares

none

SECTION THREE: BUSINESS CONTACT (Completed by Committee Member or Technical Resource)

Instructions: Complete Section Three to identify any companies from Section One with which you have a professional relationship to conduct ordinary daily business.

During the course of my regular business, I may have contact, unrelated to this procurement, with the Potential Offerors listed below:

Company Name

Contact Name

e.g. XYZ LLC – J. Smith – current contractor


Barbara J. Weber
Signature

January 21, 2020
Date

⁴ "Relative" means my spouse, child, child's child, parent, grandparent, brother or sister (of the whole or half-blood) and their spouses and the parent, brother, sister or child of my spouse.

⁵ "Pecuniary" means money or economic or other benefits that can be valued in monetary terms

⁶ "Proprietary" means ownership or rights by virtue of ownership, whether public or private.

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	ASRS Retiree Dental Insurance Solicitation Code BPM001922	Page 1 of 5	

Dear Employee or Trustee:

You have been selected to participate in the particular procurement activity as referenced above. Your regular job duties may not include procurement activities but for the purpose of this process you may play a Significant Procurement Role, as defined in A.R.S. § 41-741 in one or more of the following:

- Participating in the development of a procurement as defined in A.R.S. § 41-2503;
- Participating in the development of an evaluation tool;
- Approving a procurement as defined in A.R.S. § 41-2503 or an evaluation tool;
- Serving as a technical advisor or an evaluator who evaluates a procurement as defined in A.R.S. § 41-2503; or
- Recommending or selecting a vendor that will provide materials, services or construction to this state.

It is essential that the integrity of the procurement process be maintained to ensure that each Offeror is given fair and equal consideration. Your familiarity with particular brands, types of equipment, material, services, individuals or firms may tend to influence your evaluation; however, you are required in this specific instance to be particularly objective and guard against any tendency that might slant your evaluation in favor of a personal preference.

Requirements

You are required to report to the Procurement Officer(s) facilitating the above referenced procurement process, any actual or potential conflict of interest as defined in A.R.S. § 38-503, § 41-753, § 41-2517, and § 41-2616C. You are also subject to the Code of Ethics set forth in Section R2-5A-501 of the Arizona Department of Administration, Personnel Division, Administrative Rules and Regulations.


An additional consideration is the legal mandate to maintain strict security and confidentiality regarding the content of any proposal, as well as the proceedings of the Evaluation Committee meetings during the evaluation process. Once the evaluation process has started, it is essential that any contact with Offerors, other than that disclosed, be through, and by, the Procurement Officer(s) facilitating the above referenced procurement.

In addition, employees or trustees, other than the Procurement Officer(s) facilitating the above referenced procurement, shall not have any communication related in any way to this particular procurement, except during formal Committee meetings, with any Offeror or potential subcontractor to that Offeror prior to award, nor shall that Member discuss the proposal or their evaluation with anyone other than the Procurement Officer(s) facilitating the above referenced procurement and Evaluation Committee Members. This is mandatory.

Before beginning any participation in a particular procurement, a person who holds a Significant Procurement Role shall:

- Sign a statement that the person has no financial interest in the procurement other than that disclosed and will have no contact with any representative of a competing Offeror related to the particular procurement during the course of evaluation of proposals, except those contacts specifically authorized by A.R.S. § 41-2534, § 41-2537, § 41-2538 and § 41-2578.
- Disclose on this statement any contact unrelated to the pending procurement that the person may need to have with a representative of a competing offeror and any contact with a representative of a competing offeror during evaluation of proposals except those contacts specifically authorized by sections A.R.S. § 41-2534, § 41-2537, § 41-2538 and § 41-2578.

A person who has been identified as having a Significant Procurement Role for this procurement and fails to disclose contact with a representative of a competing offeror or who fails to provide accurate information on this statement is subject to civil penalty of at least one thousand dollars but not more than ten thousand dollars.

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Statements

The Undersigned attests to and agrees to abide by the following statements:

I have read and understand A.R.S. § 38-503, § 41-753, § 41-2517 and § 41-2616C and will fully comply with the requirements.

Whether recommending or selecting a vendor that will provide materials, services or construction to the State, approving a procurement or an evaluation tool or soliciting quotes greater than ten thousand dollars for the provision of materials, services or construction, I shall maintain strict security and confidentiality regarding the process and decisions to ensure fair competition.

I have not and will not communicate with any potential Offeror or vendor in preparation of specifications/scopes of work, evaluation tool or other confidential information related to the referenced procurement which would provide an unfair advantage or to prepare specifications/scopes of work which favor particular vendor(s).

I have not and will not provide insight, confidential information or assistance to any potential Offeror or vendor that might give an unfair advantage or inhibit fair competition for the referenced procurement. My input regarding the development of the solicitation documents, if any, has been and will be based solely on the State's requirements. I have not and will not communicate those requirements or confidential information to any potential Offeror or vendor.

If applicable, I have also received, read and understand the Evaluation Committee Instructions for this procurement. I will maintain all deliberations of the Evaluation Committee in strict confidence during the evaluation process. My recommendations shall be based upon an objective/subjective review of the Offeror's response and the appropriate award criteria from the solicitation in accordance with the Arizona Procurement Code.

I shall maintain strict security and confidentiality regarding the content of any proposal, as well as the proceedings of the Evaluation Committee meetings during the evaluation process that I may be a participant or attend as a committee member or a technical advisor.


I shall maintain strict security and confidentiality regarding the process or decisions regarding any protest or appeal that I am a participant, advisor or decision maker.

I know of no conflict of interest on my part nor have I committed, nor shall I commit, any indiscretion or accept any gratuities or favors that would compromise my impartiality or my responsibilities. Should a conflict of interest become known to me relevant to my role, I shall immediately disclose such conflict of interest.

I shall not receive any direct benefit from the utilization of confidential information, specifications, plans, scopes of work, or evaluation tools I prepared or assisted in the preparation of.

I shall not accept an offer of employment from or have employment discussions with any person or entity lobbying for or potentially responding to this procurement beginning on signature of the first procurement disclosure statement pertaining to this particular procurement and ending at the time of contract award. I shall not accept an offer of employment from or have employment discussions with the successful Offeror(s) and their lobbyists for one year following the purchased materials are delivered or the purchase of services or construction begins (A.R.S. § 41-753).

Upon termination of my employment with the State, for any reason, these provisions and statements remain in effect until such time as the solicitation has been successfully awarded by the State, or the State provides me a written release. These provisions and statements apply if I accept employment with any entity, its affiliates, subcontractors, or business partners that may submit an offer or are included in an offer to this

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solicitation.

I understand that if I knowingly violate the terms of this Agreement, I will be subject to suspension for not less than ninety days or dismissal from State service.

The Undersigned has read and understands the above and agrees to be bound by the statements, rules and principles represented herein and in accordance with the provisions of the State statutes and rules regarding personnel, conflict of interest, confidentiality and procurement.

Please check the applicable box:

Yes ☐ No ☒ I am a State employee or trustee who was employed within the past year by a person or firm responding to a solicitation, pursuant to section 41-2517(F)

Kristine Marie Ehli
 Signature
 Kristine M Ehli

 Name (Print)


 Title

12/4/2019

 Date

 Agency
 6028185815

 Phone

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Disclosures

Any information provided will be used to determine if a procurement role is appropriate and to ensure the integrity of the procurement process.

A. Outset of the Procurement (to be completed when initial meetings/work on solicitation documents begins)

SECTION ONE: POTENTIAL OFFERORS (Completed by Procurement Officer)

Delta Dental
 Metlife
 United Concordia
 Sun Life Financial dba Union Security Insurance Company

SECTION TWO: POSSIBLE CONFLICTS OF INTEREST (Completed by Employee or Trustee)

Instructions: Complete Section Two to identify any companies from Section One with which you have/had a substantial interest, as defined below, or professional, personal, or social relationship. It is not necessary to report firms if the relationship is strictly to conduct ordinary daily business in this section

As mandated by A.R.S. § 38-503, I have listed below all ownerships, employments, public and private affiliations and relationships held by me and/or a relative¹ which may have a substantial (pecuniary² and proprietary³) interest as defined in A.R.S. § 38-502 (11) in any contract, sale, purchase or service involving the agency. I understand that as my interests or those of my relatives change, I may need to modify this statement.

Company/Contact Name and Nature of Relationship

e.g. ABC Business – own shares

SECTION THREE: BUSINESS CONTACT (Completed by Employee or Trustee)

Instructions: Complete Section Three to identify any companies from Section One with which you have a professional relationship to conduct ordinary daily business.

During the course of my regular business, I may have contact, unrelated to this procurement, with the Potential Offerors listed below:

Company Name and Contact

e.g. XYZ LLC – J. Smith – current contractor

Kristine Marie Ellis

12/6/2019

Signature

Date

¹ "Relative" means my spouse, child, child's child, parent, grandparent, brother or sister (of the whole or half-blood) and their spouses and the parent, brother, sister or child of my spouse.

² "Pecuniary" means money or economic or other benefits that can be valued in monetary terms

³ "Proprietary" means ownership or rights by virtue of ownership, whether public or private.

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Phoenix, AZ 85012

B. After Solicitation Due Date and Time (to be completed after solicitation due date and time)

SECTION ONE: OFFERORS (Completed by Procurement Officer)

Arizona Dental Insurance Service Inc (Delta Dental)
Union Security Insurance Co. (Sun Life)
United Concordia Companies Inc
Chu-Chi WangDDSP LLC
Cigna Health Care
Metropolitan Life Ins Co (Metlife)

SECTION TWO: POSSIBLE CONFLICTS OF INTEREST (Completed by Employee or Trustee)

Instructions: Complete Section Two to identify any companies from Section One with which you have/had a substantial interest, as defined below, or professional, personal, or social relationship. It is not necessary to report firms if the relationship is strictly to conduct ordinary daily business in this section

As mandated by A.R.S. § 38-503, I have listed below all ownerships, employments, public and private affiliations and relationships held by me and/or a relative⁴ which may have a substantial (pecuniary⁵ and proprietary⁶) interest as defined in A.R.S. § 38-502 (11) in any contract, sale, purchase or service involving the agency. I understand that as my interests or those of my relatives change, I may need to modify this statement.

Company/Contact Name and Nature of Relationship

e.g. ABC Business – own shares

SECTION THREE: BUSINESS CONTACT (Completed by Employee or Trustee)

Instructions: Complete Section Three to identify any companies from Section One with which you have a professional relationship to conduct ordinary daily business.

During the course of my regular business, I may have contact, unrelated to this procurement, with the Potential Offerors listed below:

Company Name

Contact Name

e.g. XYZ LLC – J. Smith – current contractor

Kristine Ehler

Signature

Date

1/14/20

⁴ "Relative" means my spouse, child, child's child, parent, grandparent, brother or sister (of the whole or half-blood) and their spouses and the parent, brother, sister or child of my spouse.

⁵ "Pecuniary" means money or economic or other benefits that can be valued in monetary terms

⁶ "Proprietary" means ownership or rights by virtue of ownership, whether public or private.

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Dear Committee Member or Technical Resource:

You have been selected to participate in the particular procurement activity as referenced above. Your selection was based upon your technical knowledge and expertise in this area and your ability to develop an objective analysis of each Offer.

It is essential that the integrity of the procurement process be maintained to insure that each Offeror is given fair and equal consideration. Your familiarity with particular services, individuals, firms, brands, types of equipment, or material may tend to influence your evaluation; however, you are required in this specific instance to be particularly objective and guard against any tendency that might slant your evaluation in favor of a personal preference.

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You are required to report to the Procurement Officer(s) facilitating the above referenced procurement process, any actual or potential conflict of interest as defined in A.R.S. § 38-503, § 41-753, § 41-2517, and § 41-2616(C).

Statements

The Undersigned attests to and agrees to abide by the following statements:

I have read and understand A.R.S. § 38-503, § 41-753, § 41-2517 and § 41-2616(C) and will fully comply with the requirements.

Whether recommending or selecting a vendor that will provide materials, services or construction to the State, or approving a procurement or an evaluation tool for the provision of materials, services or construction, I shall maintain strict security and confidentiality regarding the process and decisions to ensure fair competition.

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I know of no conflict of interest on my part nor have I committed, nor shall I commit, any indiscretion or accept any gratuities or favors that would compromise my impartiality or my responsibilities. Should a conflict of interest become known to me relevant to my role, I shall immediately disclose such conflict of interest.

The Undersigned has read and understands the above and agrees to be bound by the statements, rules and principles represented herein and in accordance with the provisions of the State statutes and rules regarding conflict of interest, confidentiality and procurement.

Signature

Name (Print)

Title

Date

Organization

Phone



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B. After Solicitation Due Date and Time (to be completed after solicitation due date and time)

SECTION ONE: OFFERORS (Completed by Procurement Officer)

SECTION TWO: POSSIBLE CONFLICTS OF INTEREST (Completed by Committee Member or Technical Resource)

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Company/Contact Name and Nature of Relationship

e.g. ABC Business – own shares

SECTION THREE: BUSINESS CONTACT (Completed by Committee Member or Technical Resource)

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Company Name

Contact Name

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Signature

Date

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B. After Solicitation Due Date and Time (to be completed after solicitation due date and time)

SECTION ONE: OFFERORS *(Completed by Procurement Officer)*

Arizona Dental Insurance Service Inc (Delta Dental)
Union Security Insurance Co. (Sun Life)
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Signature

Date

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	ASRS Retiree Dental Insurance Solicitation Code BPM001922	Page 1 of 4	

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The Undersigned has read and understands the above and agrees to be bound by the statements, rules and principles represented herein and in accordance with the provisions of the State statutes and rules regarding conflict of interest, confidentiality and procurement.



 Signature
 Noel Cruse

 Name (Print)
 Benefits Consultant

 Title

10/16/2019

 Date
 Segal

 Organization
 303-714-9912

 Phone



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Disclosures

Any information provided will be used to determine if a procurement role is appropriate and to ensure the integrity of the procurement process.

A. Outset of the Procurement (to be completed when initial meetings/work on solicitation documents begins)

SECTION ONE: POTENTIAL OFFERORS (Completed by Procurement Officer)

Delta Dental
Metlife
United Concordia
Sun Life Financial dba Union Security Insurance Company

SECTION TWO: POSSIBLE CONFLICTS OF INTEREST (Completed by Committee Member or Technical Resource)

Instructions: Complete Section Two to identify any companies from Section One with which you have/had a substantial interest, as defined below, or professional, personal, or social relationship. It is not necessary to report firms if the relationship is strictly to conduct ordinary daily business in this section

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Company/Contact Name and Nature of Relationship

e.g. ABC Business – own shares

SECTION THREE: BUSINESS CONTACT (Completed by Committee Member or Technical Resource)

Instructions: Complete Section Three to identify any companies from Section One with which you have a professional relationship to conduct ordinary daily business.

During the course of my regular business, I may have contact, unrelated to this procurement, with the Potential Offerors listed below:

Company Name and Contact

e.g. XYZ LLC – J. Smith – current contractor


Signature

10/16/2019


Date

¹ "Relative" means my spouse, child, child's child, parent, grandparent, brother or sister (of the whole or half-blood) and their spouses and the parent, brother, sister or child of my spouse.

² "Pecuniary" means money or economic or other benefits that can be valued in monetary terms

³ "Proprietary" means ownership or rights by virtue of ownership, whether public or private.

SPO Form 120 – Procurement Disclosure Statement (rev 8/2014) was utilized to provide the primary content of the ASRS form (rev 12/2015). Citations listed are available on the SPO website at <https://spo.az.gov/>.

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B. After Solicitation Due Date and Time (to be completed after solicitation due date and time)

SECTION ONE: OFFERORS *(Completed by Procurement Officer)*

Arizona Dental Insurance Service Inc (Delta Dental)
 Union Security Insurance Co. (Sun Life)
 United Concordia Companies Inc
 Chu-Chi Wang DDS LLC
 Cigna Health Care
 Metropolitan Life Ins Co (Metlife)

SECTION TWO: POSSIBLE CONFLICTS OF INTEREST *(Completed by Committee Member or Technical Resource)*

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e.g. ABC Business – own shares

None

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Company Name

Contact Name

e.g. XYZ LLC – J. Smith – current contractor

Union Security Insurance Co. (Sun Life)



Signature


1/16/2020

Date

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Signature

Quentin Gunn

Name (Print)

Associate Health Consultant

Title

10/16/2019


Date

Segal Consulting

Organization

602-381-4034

Phone

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B. After Solicitation Due Date and Time (to be completed after solicitation due date and time)

SECTION ONE: OFFERORS *(Completed by Procurement Officer)*

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Company/Contact Name and Nature of Relationship

e.g. ABC Business – own shares

Karen Gunn, Mother, ASRS Member

SECTION THREE: BUSINESS CONTACT *(Completed by Committee Member or Technical Resource)*

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Company Name

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e.g. XYZ LLC – J. Smith – current contractor




Signature

Date

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B. After Solicitation Due Date and Time (to be completed after solicitation due date and time)

SECTION ONE: OFFERORS (Completed by Procurement Officer)

Arizona Dental Insurance Service Inc (Delta Dental)
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Michael A Macdissi
Signature

Michael A Macdissi

Name (Print)

VP & Health Consultant

Title

10-07-2019

Date

Segal Consulting

Organization

602-381-4000

Phone



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Metlife
United Concordia
Sun Life Financial dba Union Security Insurance Company

SECTION TWO: POSSIBLE CONFLICTS OF INTEREST (Completed by Committee Member or Technical Resource)

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As mandated by A.R.S. § 38-503, I have listed below all ownerships, employments, public and private affiliations and relationships held by me and/or a relative¹ which may have a substantial (pecuniary² and proprietary³) interest as defined in A.R.S. § 38-502 (11) in any contract, sale, purchase or service involving the agency. I understand that as my interests or those of my relatives change, I may need to modify this statement.

Company/Contact Name and Nature of Relationship

e.g. ABC Business – own shares

None

SECTION THREE: BUSINESS CONTACT (Completed by Committee Member or Technical Resource)

Instructions: Complete Section Three to identify any companies from Section One with which you have a professional relationship to conduct ordinary daily business.

During the course of my regular business, I may have contact, unrelated to this procurement, with the Potential Offerors listed below:

Company Name and Contact

e.g. XYZ LLC – J. Smith – current contractor

Delta Dental: Craig Livesay, Stacy Grosshans, Craig Christian

United Concordia - Stephanie Anthony

Signature

Michael A. Maddisi

October 7, 2019


Date

¹ "Relative" means my spouse, child, child's child, parent, grandparent, brother or sister (of the whole or half-blood) and their spouses and the parent, brother, sister or child of my spouse.

² "Pecuniary" means money or economic or other benefits that can be valued in monetary terms

³ "Proprietary" means ownership or rights by virtue of ownership, whether public or private.

SPO Form 120 – Procurement Disclosure Statement (rev 8/2014) was utilized to provide the primary content of the ASRS form (rev 12/2015). Citations listed are available on the SPO website at <https://spo.az.gov/>.

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B. After Solicitation Due Date and Time (to be completed after solicitation due date and time)

SECTION ONE: OFFERORS (Completed by Procurement Officer)

Arizona Dental Insurance Service Inc (Delta Dental)
 Union Security Insurance Co. (Sun Life)
 United Concordia Companies Inc
 Chu-Chi Wang DDSP LLC
 Cigna Health Care
 Metropolitan Life Ins Co (Metlife)

SECTION TWO: POSSIBLE CONFLICTS OF INTEREST (Completed by Committee Member or Technical Resource)

Instructions: Complete Section Two to identify any companies from Section One with which you have/had a substantial interest, as defined below, or professional, personal, or social relationship. It is not necessary to report firms if the relationship is strictly to conduct ordinary daily business in this section

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Company/Contact Name and Nature of Relationship

e.g. ABC Business – own shares

None

SECTION THREE: BUSINESS CONTACT (Completed by Committee Member or Technical Resource)

Instructions: Complete Section Three to identify any companies from Section One with which you have a professional relationship to conduct ordinary daily business.

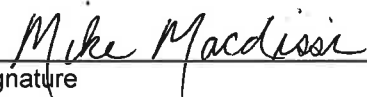
During the course of my regular business, I may have contact, unrelated to this procurement, with the Potential Offerors listed below:

Company Name

Contact Name

e.g. XYZ LLC – J. Smith – current contractor

Delta Dental CIGNA Health Care
 Sun Life MetLife



 Signature

1-17-2020
 Date

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Dear Committee Member or Technical Resource:

You have been selected to participate in the particular procurement activity as referenced above. Your selection was based upon your technical knowledge and expertise in this area and your ability to develop an objective analysis of each Offer.

It is essential that the integrity of the procurement process be maintained to insure that each Offeror is given fair and equal consideration. Your familiarity with particular services, individuals, firms, brands, types of equipment, or material may tend to influence your evaluation; however, you are required in this specific instance to be particularly objective and guard against any tendency that might slant your evaluation in favor of a personal preference.

An additional consideration is the legal mandate to maintain strict security and confidentiality regarding the content of any Offer, as well as the proceedings of the Evaluation Committee meetings during the evaluation process. Once the evaluation process has started, it is essential that any contact with Offerors, other than that disclosed, be through, and by, the Procurement Officer(s) facilitating the above referenced procurement.

In addition, Committee Members or Technical Resources shall not have any communication related in any way to this particular procurement, except during formal Committee meetings, with any Offeror or potential subcontractor to that Offeror prior to award, and shall not discuss the Offer or the evaluation with anyone other than the Procurement Officer(s) facilitating the above referenced procurement and Evaluation Committee Members.

You are required to report to the Procurement Officer(s) facilitating the above referenced procurement process, any actual or potential conflict of interest as defined in A.R.S. § 38-503, § 41-753, § 41-2517, and § 41-2616(C).

Statements

The Undersigned attests to and agrees to abide by the following statements:

I have read and understand A.R.S. § 38-503, § 41-753, § 41-2517 and § 41-2616(C) and will fully comply with the requirements.

Whether recommending or selecting a vendor that will provide materials, services or construction to the State, or approving a procurement or an evaluation tool for the provision of materials, services or construction, I shall maintain strict security and confidentiality regarding the process and decisions to ensure fair competition.

I have not and will not communicate with any potential Offeror or vendor in preparation of specifications/scopes of work, evaluation tool or other confidential information related to the referenced procurement which would provide an unfair advantage or to prepare specifications/scopes of work which favor particular vendor(s).

I have not and will not provide insight, confidential information or assistance to any potential Offeror or vendor that might give an unfair advantage or inhibit fair competition for the referenced procurement. My input regarding the development of the solicitation documents, if any, has been and will be based solely on the State's requirements. I have not and will not communicate those

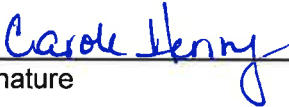
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requirements or confidential information to any potential Offeror or vendor.

I shall maintain strict security and confidentiality regarding the content of any Offer, as well as the proceedings of the Evaluation Committee meetings during the evaluation process that I may be a participant or attend as a committee member or a technical advisor. My recommendations shall be based upon a review of the Offeror's response and the appropriate evaluation criteria from the solicitation in accordance with the Arizona Procurement Code.

I know of no conflict of interest on my part nor have I committed, nor shall I commit, any indiscretion or accept any gratuities or favors that would compromise my impartiality or my responsibilities. Should a conflict of interest become known to me relevant to my role, I shall immediately disclose such conflict of interest.

The Undersigned has read and understands the above and agrees to be bound by the statements, rules and principles represented herein and in accordance with the provisions of the State statutes and rules regarding conflict of interest, confidentiality and procurement.

<div style="text-align: center;">  </div> <hr/> Signature	<hr/> 10/7/2019
<hr/> Carole Henry	<hr/> Date
<hr/> Name (Print)	<hr/> Segal Consulting
<hr/> VP, Health Benefits Manager	<hr/> Organization
<hr/> Title	<hr/> (602) 381-4015
	<hr/> Phone



PROCUREMENT DISCLOSURE STATEMENT

ASRS Retiree Dental Insurance
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ARIZONA STATE
RETIREMENT SYSTEM
3300 N Central Ave
14th Floor
Phoenix, AZ 85012

Disclosures

Any information provided will be used to determine if a procurement role is appropriate and to ensure the integrity of the procurement process.

A. Outset of the Procurement (to be completed when initial meetings/work on solicitation documents begins)

SECTION ONE: POTENTIAL OFFERORS (Completed by Procurement Officer)

Delta Dental
Metlife
United Concordia
Sun Life Financial dba Union Security Insurance Company

SECTION TWO: POSSIBLE CONFLICTS OF INTEREST (Completed by Committee Member or Technical Resource)

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Company/Contact Name and Nature of Relationship

e.g. ABC Business – own shares

None

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Instructions: Complete Section Three to identify any companies from Section One with which you have a professional relationship to conduct ordinary daily business.

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Company Name and Contact

e.g. XYZ LLC – J. Smith – current contractor

Delta Dental
Metlife
United Concordia
Sun Life Financial dba Union Security Insurance Company

Signature

10/7/2019

Date

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PROCUREMENT DISCLOSURE STATEMENT

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ARIZONA STATE
RETIREMENT SYSTEM
3300 N Central Ave
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Phoenix, AZ 85012

B. After Solicitation Due Date and Time (to be completed after solicitation due date and time)

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Contact Name

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Union Security Insurance Co. (Sun Life)
United Concordia Companies, Inc.
Cigna Health Care
Metropolitan Life Ins. Co. (Metlife)

Signature

Date

1/16/20

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