

Solicitation issued by:



Oklahoma City Public Schools
PO Box 36609, Oklahoma City, OK 73136
Phone: 405-587-1000 | web: okcps.org

Section I Bid

1) Solicitation Issue Date

2) Solicitation Number & Title

3) Solicitation Type

4) OKCPS Purchasing Contact

5) Response Due Date and Time

6) Brief Description of Requirement

Section II Bidder Information

1) Company Name

2) FEI / SSN

3) Vendor ID

4) Web Site

5) Address, City, State and Zip

6) Contact Name and Title

7) Telephone

8) Fax

9) Email Address

Section III Workers' Compensation Insurance Coverage

Bidder is required to provide a certificate of insurance showing proof of compliance with the Oklahoma Workers' Compensation Act with the bid. Proof Attached?

☐ Yes

☐ *No

*Attach a signed statement that provides specific details supporting the exemption you are claiming from the Workers' Compensation Act (Note: Pursuant to Attorney General Opinion #07-8, the exemption from 85 O.S. 2001, § 2.6 applies only to employers who are natural persons, such as sole proprietors, and does not apply to employers who are entities created by law, including but not limited to corporations, partnerships and limited liability companies.)

Section IV Signatures

1) Authorized Signature

2) Printed Name

3) Title

4) Date

Please include completed form with bid documents.