

Specifications, Terms and Conditions: RFP No. 2024-MLJT-EOR

Attachment No 1: Proposal Response Packet

A	Organization Name:					
	Primary Contact Name:					
	Address (Physical):					
	Address City, State, Zip Code					
	Address (Mailing if different from Physical):					
	Address City, State, Zip:					
	Primary Contact Email Address:					
	Organization Website Address:					
B	Indicate SAM status by checking www.sam.gov and providing print out attached here					
C	Is the organization able to manage and maintain fiscal records?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
D	Indicate level of experience with federal funds and cost allocation on a scale of 1-10, with 10 being the highest.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
		<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10
E	Indicate number of qualified project staff currently working at the organization	<input type="checkbox"/> 1-5		<input type="checkbox"/> 6-10		<input type="checkbox"/> 11 or more
F	Indicate the capacity to track deliverables and generate required reports	<input type="checkbox"/> Will need guidance		<input type="checkbox"/> Will need normal direction		<input type="checkbox"/> Will need minimal direction

G	Indicate the knowledge of and ability to perform all EOR services listed below:	<input type="checkbox"/> Will need guidance	<input type="checkbox"/> Will need normal direction	<input type="checkbox"/> Will need minimal direction
H	Experience/Expertise in EOR services	<input type="checkbox"/> 1-5 years	<input type="checkbox"/> 6-10 years	<input type="checkbox"/> 11 or more
I	Payroll processing including safeguards against fraud and abuse	<input type="checkbox"/> We run onboarding and offboarding in-house; use live checks and/or direct deposit for payroll	<input type="checkbox"/> We use a vendor such as WorkDay or Paycom and issue pay cards	<input type="checkbox"/> Other Explanation:
	Other; Explanation:			

E. Budget Proposal Proposed Budget (July 1, 2024-June 30, 2025) and Fiscal Management

Please describe in a brief narrative the fiscal management experience and fiscal controls that will be used to safeguard against fraud and abuse and to ensure timely processing of paychecks, final pay, and itemized invoicing. Note that “emergency temporary job” participants are NOT considered to be eligible for California Unemployment Insurance, overtime is not allowed, and trainee hours cannot exceed 40 hours per week or 960 hours per 12-month period. **Please provide budgeted spreadsheet showing workmans comp rate, payroll tax rates, indirect cost rate, onboarding fees, and any other itemized charges.**

F. References or Previous Contract Experience

Please provide at least two (2) references in order to verify that similar services have been provided.

Contact Name and Business Affiliation	Email Address	Telephone Number