

Arlington Public Schools Purchasing Office

NOTICE OF ADDENDUM NO. 1

Issued on October 20, 2016

TITLE: PROVISION OF INSTRUCTIONAL AIDS, TOYS & GAMES

ITB NO: 15FY17

BID DUE DATE

AND TIME: NOVEMBER 2, 2016, 1:00 P. M., (Local Prevailing Time)

The following clarifications are made part of this Invitation to Bid:

Page 1, Section titled: PRE-BID CONFERENCE. **DELETE** the website/ link listed for APS (Arlington Public Schools) and

REPLACE with the following website/ link:

https://www.apsva.us/purchasing-office/current-solicitations/

Below are the questions, with responses, received which are made part of this solicitation:

- Q1. My company is not located in Virginia, and I am not familiar with the SCC identification number (page 10) that is required. How do we obtain one or determine if we are required to have one?
- A1. The Virginia Public Procurement Act requires that all public bodies request a Bidder's identification number as issued by the State Corporation Commission (SCC). Any Bidder that is not required to be authorized to transact business in the Commonwealth as a foreign (non-Virginia) business entity shall include it its bid a statement describing why the Bidder is not required to be authorized. Information on registration and requirements can be found at this website link: https://www.scc.virginia.gov/clk/befaq/forinva.aspx
- Q2. Is it necessary to register with the SCC in order to be a vendor for your school district?
- A2. Please see the response to Question #1 above
- Q3. Does this bid include science equipment and supplies?
- A3. If you consider your product(s) "instructional aids" then please consider submitting a bid.

- Q4. Is this a bid for Textbooks?
- A4. Invitation to Bid #15FY17 is for instructional aids, toys and games. It does not include textbooks.

This Addendum No. 1 must be signed, dated and received in the Purchasing Office prior to the date and time stated above \underline{OR} acknowledgment of receipt of this addendum may be noted on the ITB Bid Form (page 11 of the ITB).

NAME OF VENDOR:	
ADDRESS:	
SIGNATURE:	DATE:

ISSUED BY:

Rebecca Hoffman, CPPB Purchasing Office

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