# REQUIRED FORMS - EXHIBIT 1 PROPOSER'S ORGANIZATION QUESTIONNAIRE/AFFIDAVIT BULLETIN NUMBER 3 – ATTACHMENT 1

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Please complete, date and sign this form and place it as the first page of your bid. The person signing the form must be authorized to sign on behalf of the Bidder and to bind the applicant in a Agreement.

Name	State Year Inc.
f your firm is a limited partnership on managing partner:	or a sole proprietorship, state the name of the proprietor of
f your firm is doing business under one egistration:	e or more DBA's, please list all DBA's and the County(s)
Name	County of Registration Year became DBA
a your firm wholly or majority award b	on a publishing of another firm O
Name of parent firm:	y, or a subsidiary of, another firm? If yes,
Name of parent firm:  State of incorporation or registration of	parent firm:
Name of parent firm:  State of incorporation or registration of	

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Proposer acknowledges and certifies that it meets and will comply with all of the Minimum Mandatory Requirements listed in Section 3.0 – Proposer's Minimum Mandatory Requirements, of this Request for Proposal, as listed below.

Check the a	appropriate	boxes:
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#### 3.1.1 □ Yes □ No

Proposer must have a minimum of two (2) years of experience within the last five (5) years providing (a) assessment, and (b) case management, and (c) placement and/or referrals into transitional services that are the same or similar to services indicated in sub-paragraph 3.2 (Participant Assessment) 3.3 (Case Management Plan) and 3.4 (Placement and/or Referral into Transitional Services), Appendix A (Statement of Work) of this RFP, to at least one of the following populations:

- Inmates housed in or just released from a federal, state, city, or county correctional system
- Parolees, probationers, homeless individuals/families, or substance use disorder and rehabilitation individuals/families.

In addition to providing references, qualifying experience for proposer's minimum mandatory requirement listed in above sub-paragraph 3.1.1 shall be documented through Letters of Confirmation (refer to sub-paragraph 7.8.7 (A1) (Organizational Experience (Section B.1.1) of this RFP) which can include program literature, and written materials describing the history and successful operation of the organization's program and services.

### 3.1.2 □ **Yes** □ **No**

Proposer must have a Project Manager with a minimum of one (1) year of experience within the last three (3) years providing (a) assessment, and (b) case management, and (c) placement and/or referrals into transitional services that are the same or similar to services indicated in subparagraphs 3.2 (Participant Assessment) 3.3 (Case Management Plan) and 3.4 (Referral into Transitional Services), Appendix A (Statement of Work) of this RFP, to at least one of the following populations:

- Inmates housed in or just released from a federal, state, city, or county correctional system
- Parolees, probationers, homeless individuals/families, or substance use disorder and rehabilitation individuals/families.

Proposer shall submit a resume and include references to verify this experience for the proposed Project Manager.

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2	1	.3	Yes		Nο
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Proposer utilizes (or will utilize) a comprehensive service-tracking database for the purpose of querying service status, service schedules, placement and/or referrals into transitional services, and generating reports.

Proposer shall describe in detail how Proposer's service-tracking database provides the required services outlined under sub-paragraph 3.8 (Service-Tracking Database) of Appendix A (Statement of Work) of this RFP. If proposer does not currently have a database in place, Proposer shall make a commitment to establishing such a service-tracking database within thirty (30) Business Days from the execution of the Contract and provide the County with details of the implementation and target date of the required database prior to commencement of Work under the Contract, if so awarded.

implementation and target date of the required database prior to commencement of Work under the Contract, if so awarded.						
3.1.4 □ Yes □ No						
Proposer must have attended the Mandatory Proposers Conference as required in Sub-paragraph 7.6 (Mandatory Proposers Conference) of this RFP).  Proposer's Name:						
						Address:
E-mail address:	Telephone number:					
Fax number:						
	(Proposer's name),Ie), certify that the information contained in this Proposer's discorrect to the best of my information and belief.					
Signature	Internal Revenue Service Employer Identification Number					
Title	California Business License Number					
Date	County WebVen Number					

County of Los Angeles Sheriff's Department

Appendix D, Required Forms Jail In-Reach Services RFP 504-SH