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 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:
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