

	<b>Request For Quote</b> <b>Date Issued</b> <b>Procurement Officer</b> <b>Phone</b> <b>E-Mail Address</b>	<b>RFQ 21002-SB</b> <b>June 29, 2020</b> <b>Scott Brechtel, CPPO</b> <b>843-953-2737</b> <b>sbrechte@citadel.edu</b>
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**DESCRIPTION:** The Citadel is seeking written quotes for diagnostic and antibody testing services related to the COVID-19 virus. The College is seeking the safest, most efficient, and cost-effective option to have employees tested for both diagnostic purposes of those who may be displaying symptoms, and general antibody testing of those who are asymptomatic. Pricing is being requested for both on-site and off-site testing options as described below.

Option 1 - Onsite diagnostic and antibody testing – The Citadel would partner with a doctor's office or clinic who would come to campus to conduct screenings on scheduled days.

Option 2 – Offsite diagnostic and antibody testing – The Citadel would select a vendor offsite to accept our workforce for testing at their location.

The Citadel has approximately 1,000 employees and tentatively plans to allow up to six (6) tests during the period from July 1, 2020 through June 30, 2021. There is no guarantee as to the minimum number of tests that will be requested, but for the purposes of quoting, the maximum number of tests requested will not exceed 6,000. The Citadel will only be charged for the actual number of tests administered.

**SUBMIT WRITTEN QUOTE by: Thursday, July 9, 2020 at 2:00 PM** via email attachment to the Procurement Officer listed above. Offerors may use a copy of this RFQ document as their written quote.

**QUESTIONS:** All questions regarding this quote request shall be submitted in writing to the email address of the Procurement Officer listed above at least two (2) business days before quotes are due.

<b>Item # or Part #</b>	<b>Description</b>	<b>Cost per Test Administered</b>
1	On-site diagnostic testing	\$
2	On-site antibody testing	\$
3	Off-site diagnostic testing	\$
4	Off-site antibody testing	\$

**The Citadel reserves the right to make award(s) either by item or lot to one or multiple responsible and responsive offerors.**

**Vendors who are claiming preferences must make it clear which preferences are being requested and include a signed copy of this page with their quote.**

**US End Product** \_\_\_\_\_ **SC End Product** \_\_\_\_\_ **Resident Vendor** \_\_\_\_\_

PREFERENCES - A NOTICE TO VENDORS (SEP. 2009): On June 16, 2009, the South Carolina General Assembly rewrote the law governing preferences available to in-state vendors, vendors using in-state subcontractors, and vendors selling in-state or US end products. This law appears in Section 11-35-1524 of the South Carolina Code of Laws. A summary of the new preferences is available at [www.procurement.sc.gov/preferences](http://www.procurement.sc.gov/preferences). **ALL THE PREFERENCES MUST BE CLAIMED AND ARE APPLIED BY LINE ITEM, REGARDLESS OF WHETHER AWARD IS MADE BY ITEM OR LOT. VENDORS ARE CAUTIONED TO CAREFULLY REVIEW THE STATUTE BEFORE CLAIMING ANY PREFERENCES. THE REQUIREMENTS TO QUALIFY HAVE CHANGED. IF YOU REQUEST A PREFERENCE, YOU ARE CERTIFYING THAT YOUR OFFER QUALIFIES FOR THE PREFERENCE YOU'VE CLAIMED. IMPROPERLY REQUESTING A PREFERENCE CAN HAVE SERIOUS CONSEQUENCES.** [11-35-1524(E)(4)&(6)]

PREFERENCES - ADDRESS AND PHONE OF IN-STATE OFFICE: Please provide the address and phone number for your in-state office in the space provided below. An in-state office is necessary to claim either the Resident Vendor Preference (11-35-1524(C) (1) (i) & (ii)) or the Resident Contractor Preference (11-35-1524(C) (1) (iii)). Accordingly, you must provide this information to qualify for the preference. An in-state office is not required, but can be beneficial, if you are claiming the Resident Subcontractor Preference (11-35-1524(D)).  
 In-State Office Address same as Home Office Address  
 In-State Office Address same as Notice Address (check only one)

HOME OFFICE ADDRESS (Address for Offeror's home office / principal place of business)	NOTICE ADDRESS (Address to which all procurement and contract related notices should be sent.) (See "Notice" clause)
	<p>Area Code - Number - Extension                      Facsimile</p> <p>_____</p> <p>E-mail Address</p> <p>_____</p>

You must submit a signed copy of this form with your quote if claiming any vendor preferences.

NAME OF OFFEROR (Full legal name of business submitting the offer)	Any award issued will be issued to, and the contract will be formed with, the entity identified as the Offeror. The entity named as the offeror must be a single and distinct legal entity. Do not use the name of a branch office or a division of a larger entity if the branch or division is not a separate legal entity, <i>i.e.</i> , a separate corporation, partnership, sole proprietorship, etc.
AUTHORIZED SIGNATURE  (Person must be authorized to submit binding offer to contract on behalf of Offeror.)	DATE SIGNED
PRINTED NAME & TITLE (Name and Business title of person signing above)	STATE VENDOR NO.  (Register to Obtain S.C. Vendor No. at <a href="http://www.procurement.sc.gov">www.procurement.sc.gov</a> )
TAXPAYER IDENTIFICATION NO.	STATE OF INCORPORATION