

## Bid Opening Results For:

IFB NUMBER	<u>22763</u>
BID OPENING	<u>3/20/2014</u>
GROUP NUMBER	<u>73500</u>
PURCHASING OFFICER	<u>Sheila Long</u>
TELEPHONE	<u>(518) 474-0293</u>

### DESCRIPTION

Hosted MarketPlace Catalog and eInvoicing Solution  
(Statewide)

# REQUEST FOR PROPOSAL

**IMPORTANT: SEE "NOTICE TO BIDDERS" CLAUSES HEREIN  
BIDS MAY BE SENT TO THE ABOVE ADDRESS ONLY**

**(E-Mail or Facsimile Bid Submissions Are NOT Acceptable)**

<b>BID OPENING</b> DATE: MARCH, 20, 2014 TIME: 11:00 AM	TITLE: Group 73500 – Hosted MarketPlace Catalog and Invoicing Solution Classification Code(s): 43, 80, 81, 82, 83, 84, and 86
REQUEST FOR PROPOSAL NUMBER: 22763	SPECIFICATION REFERENCE: As Incorporated in the Request for Proposal
CONTRACT PERIOD: Two (2) Years Plus Renewal Options For Up To One (1) Additional – Five (5) Year Term.	
<b>DESIGNATED CONTACTS:</b>	
Primary Contacts: Marc Kleinhenz; Sheila Long E-mail address: <a href="mailto:NYSPro.Catalog.invoicing@ogs.ny.gov">NYSPro.Catalog.invoicing@ogs.ny.gov</a>	Secondary Contact: Susan Filburn E-mail address: <a href="mailto:NYSPro.Catalog.invoicing@ogs.ny.gov">NYSPro.Catalog.invoicing@ogs.ny.gov</a>

The bid must be fully and properly executed by an authorized person. By signing you certify your express authority to sign on behalf of yourself, your company, or other entity and full knowledge and acceptance of this Request For Proposal, Appendix A (Standard Clauses For New York State Contracts), Appendix B (OGS General Specifications), and State Finance Law §139-j and §139-k (Procurement Lobbying), and that all information provided is complete, true and accurate. By signing, bidder affirms that it understands and agrees to comply with the OGS procedures relative to permissible contacts as required by State Finance Law §139-j (3) and §139-j (6) (b). Information may be accessed at:

Procurement Lobbying: <http://www.ogs.ny.gov/aboutOgs/regulations/defaultAdvisoryCouncil.html>

Bidder's Federal Tax Identification Number: (Do Not Use Social Security Number) 52-2189693	NYS Vendor Identification Number: (See "New York State Vendor File Registration" clause) 1000009462
Legal Business Name of Company Bidding: Carahsoft Technology Corp.	
D/B/A - Doing Business As (if applicable):	
Street: 12369 Sunrise Valley Drive City: Reston State: VA County: Fairfax Zip Code: 20191	
If applicable, place an "x" in the appropriate box(es) (check all that apply):	<input type="checkbox"/> NYS Small Business # Employees <input type="checkbox"/> NYS Minority Owned Business <input type="checkbox"/> NYS Women Owned Business
If applicable, place an "x" in the appropriate box(es) (check all that apply):	<input type="checkbox"/> Manufactured Within NYS <input type="checkbox"/> Solely Manufactured Outside NYS <input type="checkbox"/> Partially Manufactured Outside NYS %
If you are not bidding, place an "x" in the box and return this page only. <input type="checkbox"/> WE ARE UNABLE TO BID AT THIS TIME BECAUSE:	
Bidder's Signature:  Title: Government Account Representative	Printed or Typed Name: Bethany Blackwell Date: 03/13/2014
Phone: 703.230.7435 Extension 7435 Fax: 703.871.8505 Extension	Toll Free Phone: 888.662.2724 Extension Toll Free Fax: Extension
E-mail Address: <a href="mailto:Bethany.Blackwell@carahsoft.com">Bethany.Blackwell@carahsoft.com</a>	Company Website: <a href="http://www.carahsoft.com">www.carahsoft.com</a>

FOR NEW YORK STATE PROCUREMENT USE ONLY

P.R. # 22763	LIT	<input type="checkbox"/>	MEMO	<input type="checkbox"/>	LET	<input type="checkbox"/>	OTHER	<input type="checkbox"/>	MISSING PAGES	<input checked="" type="checkbox"/>
--------------	-----	--------------------------	------	--------------------------	-----	--------------------------	-------	--------------------------	---------------	-------------------------------------

# REQUEST FOR PROPOSAL

**IMPORTANT: SEE "NOTICE TO BIDDERS" CLAUSES HEREIN  
BIDS MAY BE SENT TO THE ABOVE ADDRESS ONLY**

**(E-Mail or Facsimile Bid Submissions Are NOT Acceptable)**

<b>BID OPENING</b> DATE: MARCH, 20, 2014 TIME: 11:00 AM	TITLE: Group 73500 – Hosted MarketPlace Catalog and eInvoicing Solution Classification Code(s): 43, 80, 81, 82, 83, 84, and 86
REQUEST FOR PROPOSAL NUMBER: 22763	SPECIFICATION REFERENCE: As Incorporated in the Request for Proposal
CONTRACT PERIOD: Two (2) Years Plus Renewal Options For Up To One (1) Additional – Five (5) Year Term.	
DESIGNATED CONTACTS:	
Primary Contacts: Marc Kleinhenz; Sheila Long E-mail address: NYSPro.Catalog.eInvoicing@ogs.ny.gov	Secondary Contact: Susan Filburn E-mail address: NYSPro.Catalog.eInvoicing@ogs.ny.gov

The bid must be fully and properly executed by an authorized person. By signing you certify your express authority to sign on behalf of yourself, your company, or other entity and full knowledge and acceptance of this Request For Proposal, Appendix A (Standard Clauses For New York State Contracts), Appendix B (OGS General Specifications), and State Finance Law §139-j and §139-k (Procurement Lobbying), and that all information provided is complete, true and accurate. By signing, bidder affirms that it understands and agrees to comply with the OGS procedures relative to permissible contacts as required by State Finance Law §139-j (3) and §139-j (6) (b). Information may be accessed at: Procurement Lobbying: <http://www.ogs.ny.gov/aboutOgs/regulations/defaultAdvisoryCouncil.html>

Bidder's Federal Tax Identification Number: (Do Not Use Social Security Number) 56-2127592	NYS Vendor Identification Number: (See "New York State Vendor File Registration" clause) 4118544
Legal Business Name of Company Bidding: SciQuest, Inc.	
D/B/A - Doing Business As (if applicable): N/A	
Street 6501 Weston Parkway, Suite 200    City Cary    State NC    County Wake    Zip Code 27513	
If applicable, place an "x" in the appropriate box(es) (check all that apply): <input type="checkbox"/> NYS Small Business <input type="checkbox"/> NYS Minority Owned Business <input type="checkbox"/> NYS Women Owned Business # Employees	
If applicable, place an "x" in the appropriate box(es) (check all that apply): <input type="checkbox"/> Manufactured Within NYS <input type="checkbox"/> Solely Manufactured Outside NYS <input type="checkbox"/> Partially Manufactured Outside NYS %	
If you are not bidding, place an "x" in the box and return this page only. <input type="checkbox"/> WE ARE UNABLE TO BID AT THIS TIME BECAUSE:	
Bidder's Signature:  Title: CFO	Printed or Typed Name: Rudy Howard Date: 3/18/14
Phone: 919-659-2100    Extension Fax: 919-659-2199    Extension E-mail Address: rhoward@sciquest.com	Toll Free Phone: 888-638-7322    Extension Toll Free Fax: N/A    Extension Company Website: www.sciquest.com

**FOR NEW YORK STATE PROCUREMENT USE ONLY**

P.R. # 22763    LIT        MEMO        LET        OTHER        MISSING PAGES    19

 ORIGINAL

1.0 Completed and Signed Pages 1 and 2 of the RFP

**REQUEST FOR PROPOSAL**

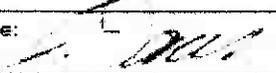
**IMPORTANT: SEE "NOTICE TO BIDDERS" CLAUSES HEREIN  
 BIDS MAY BE SENT TO THE ABOVE ADDRESS ONLY**

**(E-Mail or Facsimile Bid Submissions Are NOT Acceptable)**

BID OPENING DATE: MARCH 20, 2014 TIME: 11:00 AM	TITLE: Group 73500 - Hosted MarketPlace Catalog and Invoicing Solution Classification Code(s): 43, 80, 81, 82, 83, 84, and 86
REQUEST FOR PROPOSAL NUMBER: 22763	SPECIFICATION REFERENCE: As Incorporated in the Request for Proposal
CONTRACT PERIOD: Two (2) Years Plus Renewal Options For Up To One (1) Additional - Five (5) Year Term.	
DESIGNATED CONTACTS:	
Primary Contacts: Marc Kleinhenz, Sheila Long E-mail address: <a href="mailto:NYSPro.Catalog.invoicing@ogs.ny.gov">NYSPro.Catalog.invoicing@ogs.ny.gov</a>	Secondary Contact: Susan Filburn E-mail address: <a href="mailto:NYSPro.Catalog.invoicing@ogs.ny.gov">NYSPro.Catalog.invoicing@ogs.ny.gov</a>

The bidder hereby certifies that the person(s) named herein is/are personally signing this bid, that the bidder certifies authority to sign on behalf of yourself, your company, or other entity with full knowledge and acceptance of the Request for Proposal, Appendix A) Standard Clauses For New York State Contracts; Appendix B) OGS General Specifications; and State Finance Law § 249, and § 249-k (Prohibition of lobbying), and that all information provided is complete, true and accurate. By signing, bidder affirms that it represents and agrees to comply with the following conditions to the maximum extent practicable, consistent as required by State Finance Law § 249 (1)(c) and § 249-k(1)(c): information may be accessed at

Procurement Lobbying: <http://www.ogs.ny.gov/about/ogs/regulations/defaultAdvisoryCouncil.html>

Bidder's Federal Tax Identification Number: (Do Not Use Social Security Number) 46-3900479	NYS Vendor Identification Number: (See "New York State Vendor File Registration" clause)
Legal Business Name of Company Bidding: <b>Recogniti LLP</b>	
D/B/A - Doing Business As (if applicable):	
Street: <b>8013 Ellingson Dr</b>	City: <b>Rockville</b> State: <b>MD</b> County: <b>Montgomery</b> Zip Code: <b>20815</b>
If applicable, place an "x" in the appropriate box(es) (check as therapy):	<input type="checkbox"/> NYS Small Business 15 # Employees <input type="checkbox"/> NYS Minority Owned Business <input type="checkbox"/> NYS Women Owned Business
If applicable, place an "x" in the appropriate box(es) (check as therapy):	<input type="checkbox"/> Manufactured Within NYS <input type="checkbox"/> Solely Manufactured Outside NYS <input checked="" type="checkbox"/> Partially Manufactured Outside NYS 75 %
If you are not bidding, place an "x" in the box and return this page only. <input type="checkbox"/> WE ARE UNABLE TO BID AT THIS TIME BECAUSE:	
Bidder's Signature: 	Printed or Typed Name: <b>George Ianaki</b>
Title: <b>Partner</b>	Date: <b>March 18, 2014</b>
Phone: <b>202 412 9052</b> Extension:	Toll Free Phone: Extension:
Fax: Extension:	Toll Free Fax: Extension:
E-mail Address: <b>gianaki@recogniti.com</b>	Company Website: <b>www.recogniti.com</b>
<b>FOR NEW YORK STATE PROCUREMENT USE ONLY</b>	
PR # 22763 <input type="checkbox"/> 107 <input type="checkbox"/> 108 <input type="checkbox"/> 109 <input type="checkbox"/> 110 <input type="checkbox"/> 111 <input type="checkbox"/> 112 <input type="checkbox"/> 113 <input type="checkbox"/> 114 <input type="checkbox"/> 115 <input type="checkbox"/> 116 <input type="checkbox"/> 117 <input type="checkbox"/> 118 <input type="checkbox"/> 119 <input type="checkbox"/> 120 <input type="checkbox"/> OTHER <input type="checkbox"/> MISSING PAGES	

22763rfp.docx (rev 070614)

# REQUEST FOR PROPOSAL

**IMPORTANT: SEE "NOTICE TO BIDDERS" CLAUSES HEREIN  
BIDS MAY BE SENT TO THE ABOVE ADDRESS ONLY  
(E-Mail or Facsimile Bid Submissions Are NOT Acceptable)**

<b>BID OPENING</b> DATE: MARCH, 20, 2014 TIME: 11:00 AM	<b>TITLE:</b> Group 73500 – Hosted MarketPlace Catalog and eInvoicing Solution <b>Classification Code(s):</b> 43, 80, 81, 82, 83, 84, and 86
<b>REQUEST FOR PROPOSAL NUMBER:</b> 22763	<b>SPECIFICATION REFERENCE:</b> As Incorporated in the Request for Proposal
<b>CONTRACT PERIOD:</b> Two (2) Years Plus Renewal Options For Up To One (1) Additional – Five (5) Year Term.	
<b>DESIGNATED CONTACTS:</b>	
<b>Primary Contacts:</b> Marc Kleinhenz; Sheila Long <b>E-mail address:</b> <a href="mailto:NYSPro.Catalog.eInvoicing@ogs.ny.gov">NYSPro.Catalog.eInvoicing@ogs.ny.gov</a>	<b>Secondary Contact:</b> Susan Filburn <b>E-mail address:</b> <a href="mailto:NYSPro.Catalog.eInvoicing@ogs.ny.gov">NYSPro.Catalog.eInvoicing@ogs.ny.gov</a>

The bid must be fully and properly executed by an authorized person. By signing you certify your express authority to sign on behalf of yourself, your company, or other entity and full knowledge and acceptance of this Request For Proposal, Appendix A (Standard Clauses For New York State Contracts), Appendix B (OGS General Specifications), and State Finance Law §139-j and §139-k (Procurement Lobbying), and that all information provided is complete, true and accurate. By signing, bidder affirms that it understands and agrees to comply with the OGS procedures relative to permissible contacts as required by State Finance Law §139-j (3) and §139-j (6) (b). Information may be accessed at:  
 Procurement Lobbying: <http://www.ogs.ny.gov/aboutOgs/regulations/defaultAdvisoryCouncil.html>

<b>Bidder's Federal Tax Identification Number:</b> (Do Not Use Social Security Number) 26-0557687	<b>NYS Vendor Identification Number:</b> (See "New York State Vendor File Registration" clause)
<b>Legal Business Name of Company Bidding:</b> Perfect Commerce, LLC	
<b>D/B/A - Doing Business As (if applicable):</b> N/A	
<b>Street 1 Compass Way, Suite 120</b> <b>City Newport News</b> <b>State VA</b> <b>County N/A</b> <b>Zip Code 23606</b>	
If applicable, place an "x" in the appropriate box(es) (check all that apply):	
<input type="checkbox"/> <b>NYS Small Business</b> 127 # Employees	<input type="checkbox"/> <b>NYS Minority Owned Business</b> <input type="checkbox"/> <b>NYS Women Owned Business</b>
If applicable, place an "x" in the appropriate box(es) (check all that apply):	
<input type="checkbox"/> <b>Manufactured Within NYS</b>	<input type="checkbox"/> <b>Solely Manufactured Outside NYS</b> <input type="checkbox"/> <b>Partially Manufactured Outside NYS</b> %
If you are not bidding, place an "x" in the box and return this page only.	
<input type="checkbox"/> <b>WE ARE UNABLE TO BID AT THIS TIME BECAUSE:</b>	
<b>Bidder's Signature:</b>	<b>Printed or Typed Name:</b> Charles Shannon <b>Date:</b> 3/15/2014
<b>Title:</b> Chief Operating Officer	<b>Phone:</b> 1 (757) 766-8247    Extension <b>Toll Free Phone:</b> 1 (757) 871-3177    Extension
<b>Fax:</b> 1 (757) 865-3452    Extension	<b>Toll Free Fax:</b> 1 (757) 865-3452    Extension
<b>E-mail Address:</b> <a href="mailto:Tripp.Shannon@perfect.com">Tripp.Shannon@perfect.com</a>	<b>Company Website:</b> <a href="http://www.perfect.com">http://www.perfect.com</a>

FOR NEW YORK STATE PROCUREMENT USE ONLY

P.R. # 22763    LIT        MEMO        LET        OTHER        MISSING PAGES

# REQUEST FOR PROPOSAL

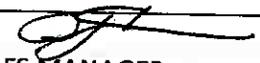
**IMPORTANT: SEE "NOTICE TO BIDDERS" CLAUSES HEREIN  
BIDS MAY BE SENT TO THE ABOVE ADDRESS ONLY**

**(E-Mail or Facsimile Bid Submissions Are NOT Acceptable)**

<b>OPENING DATE:</b> MARCH, 20, 2014 <b>TIME:</b> 11:00 AM	<b>TITLE:</b> Group 73500 – Hosted MarketPlace Catalog and invoicing Solution <b>Classification Code(s):</b> 43, 80, 81, 82, 83, 84, and 86
<b>REQUEST FOR PROPOSAL NUMBER:</b> 22763	<b>SPECIFICATION REFERENCE:</b> As Incorporated in the Request for Proposal
<b>CONTRACT PERIOD:</b> Two (2) Years Plus Renewal Options For Up To One (1) Additional – Five (5) Year Term.	
<b>DESIGNATED CONTACTS:</b>	
<b>Primary Contacts:</b> Marc Kleinhenz; Sheila Long <b>E-mail address:</b> <a href="mailto:NYSPro.Catalog.eInvoicing@ogs.ny.gov">NYSPro.Catalog.eInvoicing@ogs.ny.gov</a>	<b>Secondary Contact:</b> Susan Filburn <b>E-mail address:</b> <a href="mailto:NYSPro.Catalog.eInvoicing@ogs.ny.gov">NYSPro.Catalog.eInvoicing@ogs.ny.gov</a>

The bid must be fully and properly executed by an authorized person. By signing you certify your express authority to sign on behalf of yourself, your company, or other entity and full knowledge and acceptance of this Request For Proposal, Appendix A (Standard Clauses For New York State Contracts), Appendix B (OGS General Specifications), and State Finance Law §139-j and §139-k (Procurement Lobbying), and that all information provided is complete, true and accurate. By signing, bidder affirms that it understands and agrees to comply with the OGS procedures relative to permissible contacts as required by State Finance Law §139-j (3) and §139-j (6) (b). Information may be accessed at:

Procurement Lobbying: <http://www.ogs.ny.gov/aboutOgs/regulations/defaultAdvisoryCouncil.html>

<b>Bidder's Federal Tax Identification Number:</b> <i>(Do Not Use Social Security Number)</i> 31-1710063	<b>NYS Vendor Identification Number:</b> <i>(See "New York State Vendor File Registration" clause)</i>
<b>Legal Business Name of Company Bidding:</b> Vinimaya, Inc.	
<b>D/B/A - Doing Business As (if applicable):</b>	
<b>Street</b> 10290 Alliance Road <b>City</b> Cincinnati <b>State</b> OH <b>County</b> Hamilton <b>Zip Code</b> 45242	
If applicable, place an "x" in the appropriate box(es) <i>(check all that apply)</i> :	<input type="checkbox"/> NYS Small Business <input type="checkbox"/> NYS Minority Owned Business <input type="checkbox"/> NYS Women Owned Business # Employees
If applicable, place an "x" in the appropriate box(es) <i>(check all that apply)</i> :	<input type="checkbox"/> Manufactured Within NYS <input type="checkbox"/> Solely Manufactured Outside NYS <input type="checkbox"/> Partially Manufactured Outside NYS %
If you are not bidding, place an "x" in the box and return this page only. <input type="checkbox"/> WE ARE UNABLE TO BID AT THIS TIME BECAUSE:	
<b>Bidder's Signature:</b>  <b>Title:</b> REGIONAL SALES MANAGER	<b>Printed or Typed Name:</b> DENNIS HYDE <b>Date:</b> 3/18/2014
<b>Phone:</b> 513-941-2510 <b>Extension:</b> [REDACTED]	<b>Toll Free Phone:</b> [REDACTED] <b>Extension:</b> [REDACTED]
<b>Fax:</b> 513-794-1724 <b>Extension:</b> [REDACTED]	<b>Toll Free Fax:</b> [REDACTED] <b>Extension:</b> [REDACTED]
<b>E-mail Address:</b> <a href="mailto:jhutchinson@vinimaya.com">jhutchinson@vinimaya.com</a> <b>Company Website:</b> <a href="http://www.vinimaya.com">www.vinimaya.com</a>	

FOR NEW YORK STATE PROCUREMENT USE ONLY

P.R. # 22763    LIT        MEMO        LET        OTHER        MISSING PAGES    