



# Collin County Purchasing

**2023-073**

## **Elections Specialized Printing**

Issue Date: 1/24/2023

Questions Deadline: 2/10/2023 05:00 PM (CT)

Response Deadline: 2/16/2023 02:00 PM (CT)

Collin County Purchasing

### **Contact Information**

Contact: Susan Hayes Buyer II

Address: Purchasing

Admin. Building

Ste. 3160

2300 Bloomdale Rd.

Ste. 3160

McKinney, TX 75071

Phone: (972) 548-4122

Fax: (972) 548-4694

Email: [shayes@co.collin.tx.us](mailto:shayes@co.collin.tx.us)

## Event Information

Number: 2023-073  
Title: Elections Specialized Printing  
Type: Invitation for Bid  
Issue Date: 1/24/2023  
Question Deadline: 2/10/2023 05:00 PM (CT)  
Response Deadline: 2/16/2023 02:00 PM (CT)

## Ship To Information

Contact: Bruce Sherbet  
Address: Elections  
Elections  
2010 Redbud Blvd.  
Ste. 102  
McKinney, TX 75069

## Billing Information

Address: Auditor  
Admin. Building  
Ste. 3100  
2300 Bloomdale Rd.  
Ste. 3100  
McKinney, TX 75071

## Bid Attachments

### **LEGAL\_NOTICE 2023-073.pdf**

Legal Notice

[View Online](#)

### **General\_Instructions\_Bid\_07.18.2022.docx**

1.0 General Instructions IFB

[View Online](#)

### **Terms\_of\_Contract\_Bid\_-\_2.10.21.docx**

Terms of Contract - Bid

[View Online](#)

### **Insurance updated 1-26-2015.doc**

Minimum Insurance Requirements

[View Online](#)

### **4.0\_special\_terms\_and\_conditions.doc**

4.0 Special Conditions & Specifications

[View Online](#)

### **Attachment A, Line 1, 17-5.pdf**

Attachment A

[View Online](#)

### **Attachment B, Form 17-7 (M11).pdf**

Attachment B

[View Online](#)

### **Attachment C, Collin\_2021\_VR17 English.pdf**

Attachment C

[View Online](#)

### **Attachment D - Collin\_2021\_VR17\_Spanish.pdf**

Attachment D

[View Online](#)

### **Attachment E, Form 17-38 (M50) E\_S.pdf**

Attachment E

[View Online](#)

### **Attachment F, ABBME.pdf**

Attachment F

[View Online](#)

### **Attachment G, ABBMS.pdf**

Attachment G

[View Online](#)

**Attachment H, Line 8 - ABBMEL.pdf**

[View Online](#)

Attachment H

**Attachment I, #10 Plain Envelope with Collin County Logo.pdf**

[View Online](#)

Attachment I

**Attachment J, #10 Left Window Envelope with logo.pdf**

[View Online](#)

Attachment J

**Attachment K, #9 Plain Envelope with logo & return postage.pdf**

[View Online](#)

Attachment K

**CIQ\_113015.pdf**

[View Online](#)

Conflict of Interest Questionnaire

**HB\_23-CIQ.docx**

[View Online](#)

Information Regarding Conflict of Interest Questionnaire

**W-9 rev 2018.pdf**

[View Online](#)

W-9 Form

**Requested Attachments**

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**W-9**

*(Attachment required)*

**Conflict of Interest Questionnaire**

**Bid Attributes**

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**1 eBid Notice**

Collin County exclusively uses IonWave Technologies, Inc. (Collin County eBid) for the notification and dissemination of all solicitations. The receipt of solicitations through any other means may result in your receipt of incomplete specifications and/or addendums which could ultimately render your bid/proposal non-compliant. Collin County accepts no responsibility for the receipt and/or notification of solicitations through any other means. Please initial.

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*(Required: Maximum 1000 characters allowed)*

**2 Contact Information**

List the contact name, email address and phone number of the main person(s) Collin County should contact in reference to this solicitation. Contact(s) shall be duly authorized by the company, corporation, firm, partnership or individual to respond to any questions, clarification, and or offers in response to this solicitation.

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*(Required: Maximum 4000 characters allowed)*

**3 Delivery**

Delivery will be F.O.B. inside delivery at Collin County designated locations and all transportation charges are to be paid by the supplier to destination. Please state delivery in calendar days from date of order.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
*(Required: Maximum 1000 characters allowed)*

**4 Exceptions (for IFB/Quote)**

If you take any exceptions to the specifications, you must submit the exception/s as a Question via the public eBid portal before the Question Cutoff Date for County consideration. The County will review and publish a response via eBid. If you would like to offer any substitutions, please review the General Instructions Document §1.17 and submit by separate attachment. Please initial.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
*(Required: Maximum 1000 characters allowed)*

**5 Insurance Acknowledgement**

I understand that the insurance requirements of this solicitation are required and are included in the submitted pricing. A certificate of insurance shall be submitted to the Purchasing department if I am awarded all or a portion of the resulting contract. Please initial.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
*(Required: Maximum 1000 characters allowed)*

**6 Subcontractors**

State the business name of all subcontractors and the type of work they will be performing under this contract. If you are fully qualified to self-perform the entire contract, please respond with "Not Applicable-Self Perform".

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
*(Required: Maximum 4000 characters allowed)*

**7 Reference No. 1**

List a company or governmental agency, other than Collin County, where these same/like products/services, as stated herein, have been provided. Texas references are preferred. Include the following: Company/Entity, Contact, Address, City/State/Zip, Phone, and E-Mail. It is the responsibility of the Bidder/Proposer to ensure submitted references will be responsive to the County's requests. The County reserves the right to contact references other than those listed, and to consider any information acquired from all references during the evaluation process.

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*(Required: Maximum 4000 characters allowed)*

**8 Reference No. 2**

List a company or governmental agency, other than Collin County, where these same/like products/services, as stated herein, have been provided. Texas references are preferred. Include the following: Company/Entity, Contact, Address, City/State/Zip, Phone, and E-Mail. It is the responsibility of the Bidder/Proposer to ensure submitted references will be responsive to the County's requests. The County reserves the right to contact references other than those listed, and to consider any information acquired from all references during the evaluation process.

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*(Required: Maximum 4000 characters allowed)*

**9 Reference No. 3**

List a company or governmental agency, other than Collin County, where these same/like products/services, as stated herein, have been provided. Texas references are preferred. Include the following: Company/Entity, Contact, Address, City/State/Zip, Phone, and E-Mail. It is the responsibility of the Bidder/Proposer to ensure submitted references will be responsive to the County's requests. The County reserves the right to contact references other than those listed, and to consider any information acquired from all references during the evaluation process.

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*(Required: Maximum 4000 characters allowed)*

**1  
0** **Cooperative Contracts**

As permitted under Title 8, Chapter 271, Subchapter F, Section 271.101 and 271.102 V.T.C.A. and Title 7, Chapter 791, Subchapter C, Section 791.025, V.T.C.A., other local governmental entities may wish to also participate under the same terms and conditions contained in this contract. Each entity wishing to participate must enter into an inter-local agreement with Collin County and have prior authorization from vendor. If such participation is authorized, all purchase orders will be issued directly from and shipped directly to the local governmental entity requiring supplies/services. Collin County shall not be held responsible for any orders placed, deliveries made or payment for supplies/services ordered by these entities. Each entity reserves the right to determine their participation in this contract. Would bidder be willing to allow other local governmental entities to participate in this contract, if awarded, under the same terms and conditions?

Yes  No

*(Required: Check only one)*

**1  
1** **Preferential Treatment**

The County of Collin, as a governmental agency of the State of Texas, may not award a contract to a nonresident bidder unless the nonresident's bid is lower than the lowest bid submitted by a responsible Texas resident bidder by the same amount that a Texas resident bidder would be required to underbid a nonresident bidder to obtain a comparable contract in the state in which the nonresident's principal place of business is located (Government Code, Title 10, V.T.C.A., Chapter 2252, Subchapter A).

1. Is your principal place of business in the State of Texas?
2. If your principal place of business is not in Texas, in which State is your principal place of business?
3. If your principal place of business is not in Texas, does your state favor resident bidders (bidders in your state) by some dollar increment or percentage?
4. If your state favors resident bidders, state by what dollar amount or percentage.

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*(Required: Maximum 4000 characters allowed)*

**1  
2** **Debarment Certification**

I certify that neither my company nor an owner or principal of my company has been debarred, suspended or otherwise made ineligible for participation in Federal Assistance programs under Executive Order 12549, "Debarment and Suspension," as described in the Federal Register and Rules and Regulations. Please initial.

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*(Required: Maximum 1000 characters allowed)*

**1  
3** **Immigration and Reform Act**

I declare and affirm that my company is in compliance with the Immigration and Reform Act of 1986 and all employees are legally eligible to work in the United States of America. I further understand and acknowledge that any non-compliance with the Immigration and Reform Act of 1986 at any time during the term of this contract will render the contract voidable by Collin County. Please initial.

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*(Required: Maximum 1000 characters allowed)*

**1**  
**4** **Disclosure of Certain Relationships**

Chapter 176 of the Texas Local Government Code requires that any vendor considering doing business with a local government entity disclose the vendor's affiliation or business relationship that might cause a conflict of interest with a local government entity. Subchapter 6 of the code requires a vendor to file a conflict of interest questionnaire (CIQ) if a conflict exists. By law this questionnaire must be filed with the records administrator of Collin County no later than the 7th business day after the date the vendor becomes aware of an event that requires the statement to be filed. A vendor commits an offense if the vendor knowingly violates the code. An offense under this section is a misdemeanor. By submitting a response to this request, the vendor represents that it is in compliance with the requirements of Chapter 176 of the Texas Local Government Code. Please send completed forms to the Collin County County Clerk's Office located at 2300 Bloomdale Rd., Suite 2104, McKinney, TX 75071. Please initial.

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*(Required: Maximum 1000 characters allowed)*

**1**  
**5** **Anti-Collusion Statement**

Bidder certifies that its Bid/Proposal is made without prior understanding, agreement, or connection with any corporation, firm, or person submitting a Bid/Proposal for the same materials, services, supplies, or equipment and is in all respects fair and without collusion or fraud. No premiums, rebates or gratuities permitted; either with, prior to, or after any delivery of material or provision of services. Any such violation may result in Agreement cancellation, return of materials or discontinuation of services and the possible removal from bidders list. Please initial.

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*(Required: Maximum 1000 characters allowed)*

**1**  
**6** **Disclosure of Interested Parties**

Section 2252.908 of the Texas Government Code requires a business entity entering into certain contracts with a governmental entity to file with the governmental entity a disclosure of interested parties at the time the business entity submits the signed contract to the governmental entity. Section 2252.908 requires the disclosure form (Form 1295) to be signed by the authorized agent of the contracting business entity, acknowledging that the disclosure is made under oath and under penalty of perjury. Section 2252.908 applies only to a contract that requires an action or vote by the governing body of the governmental entity before the contract may be signed or has a value of at least \$1 million. Section 2252.908 provides definitions of certain terms occurring in the section. Section 2252.908 applies only to a contract entered into on or after January 1, 2016. Please initial.

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*(Required: Maximum 1000 characters allowed)*

**1**  
**7** **Notification Survey**

In order to better serve our offerors, the Collin County Purchasing Department is conducting the following survey. We appreciate your time and effort expended to submit your bid. Should you have any questions or require more information please call (972) 548-4165. How did you receive notice of this request?

Plano Star Courier    Plan Room    Collin County eBid Notification    Collin County Website

Other

*(Required: Check only one)*

**1  
8 Bidder Acknowledgement**

Bidder acknowledges, understands the specifications, any and all addenda, and agrees to the bid terms and conditions and can provide the minimum requirements stated herein. Bidder acknowledges they have read the document in its entirety, visited the site, performed investigations and verifications as deemed necessary, is familiar with local conditions under which work is to be performed and will be responsible for any and all errors in Bid submittal resulting from Bidder's failure to do so. Bidder acknowledges the prices submitted in this Bid have been carefully reviewed and are submitted as correct and final. If Bid is accepted, vendor further certifies and agrees to furnish any and all products upon which prices are extended at the price submitted, and upon conditions in the specifications of the Invitation for Bid. Please initial.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
*(Required: Maximum 1000 characters allowed)*

**1  
9 Critical Infrastructure Affirmation**

Pursuant to section 2274.0102 of the Texas Government Code, Respondent certifies that neither it nor its parent company, nor any affiliate of Respondent or its parent company, is: (1) majority owned or controlled by citizens or governmental entities of China, Iran, North Korea, Russia, or any other country designated by the Governor under Government Code Section 2274.0103, or (2) headquartered in any of those countries. Please initial.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
*(Required: Maximum 1000 characters allowed)*

**2  
0 Energy Company Boycotts**

Pursuant to Section 2274.002 of the Texas Government Code, should the contract have a value of \$100,000 or more and the company employs 10 or more full-time employees, Respondent represents and warrants that: (1) it does not, and will not for the duration of the contract, boycott energy companies, and (2) will not boycott energy companies during the term of the contract. If circumstances relevant to this provision change during the course of the contract, Respondent shall promptly notify Agency. Please initial.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
*(Required: Maximum 1000 characters allowed)*

**2  
1 Firearm Entities and Trade Associations Discrimination**

Pursuant to section 2274.002 of the Texas Government Code, should the contract have a value of \$100,000 or more and the company employs 10 or more full-time employees, Respondent verifies that: (1) it does not have a practice, policy, guidance, or directive that discriminates against a firearm entity or firearm trade association and (2) will not discriminate during the term of the contract against a firearm entity or firearm trade association. If circumstances relevant to this provision change during the course of the contract, Respondent shall promptly notify Agency. Please initial.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
*(Required: Maximum 1000 characters allowed)*

**Bid Lines**



**1** FORM 17-5 (M9), STATEMENT OF RESIDENCE, 8" X 6", 100 lb., yellow card stock with black print on two (2) sides. One side printed IN ENGLISH and second side printed IN SPANISH. NO PERFORATION.  
(See Attachment A)

Estimated annual usage: 60,000.

Bidder shall state the price for quantity of one (1) each for a quantity break of 40,001 - 60,000 in the space provided.

Bidder shall state the price of one (1) each for All Item Attribute quantity breaks for informational purposes only. All pricing, including item attributes, shall be held firm through the contract term.

**All attributes must be bid upon to be considered for award of the line.**

*(Response required)*

Quantity: 60000 UOM: each Unit Price: \$  Total: \$

Supplier Notes: \_\_\_\_\_  
\_\_\_\_\_

- No bid
- Additional notes  
*(Attach separate sheet)*

**Item Attributes**

**1. Quantity (Each Price)**

10,000 - 20,000

\$

*(Required: Numbers only)*

**2. Quantity (Each Price)**

20,001 - 40,000

\$

*(Required: Numbers only)*

**2** FORM 17-7 (M11), VOTER REGISTRATION CERTIFICATE, Blank Stock 4 1/2" x 6", tractor feed with black print on two (2) sides, color insert, perforated design. Color of certificate is prescribed by Secretary of state.  
(See Attachment B)

Estimated annual usage: 200,000.

Bidder shall state the price for quantity of one (1) each for a quantity break of 100,001 - 200,000 in the space provided.

Bidder shall state the price of one (1) each for All Item Attribute quantity breaks for informational purposes only. All pricing, including item attributes, shall be held firm through the contract term.

**All attributes must be bid upon to be considered for award of the line.**

*(Response required)*

Quantity: 200000 UOM: each Unit Price: \$  Total: \$

Item Notes: **THIS WILL BE AWARDED ALONG WITH LINE #3 TO ONE VENDOR.**

Supplier Notes: \_\_\_\_\_  
\_\_\_\_\_

- No bid
- Additional notes  
*(Attach separate sheet)*

**Item Attributes**

**1. Quantity (Each Price)**

10,000 - 50,000

\$

(Required: Numbers only)

**2. Quantity (Each Price)**

50,001 - 100,000

\$

(Required: Numbers only)

**3** FORM 17-9 (M64), MASS MAILOUT, VOTER REGISTRATION CERTIFICATE, Reference Section 4.0 Special Conditions and Specifications, Article 4.17.1 - 4.17.12 of Bid package for details.  
4 1/2" x 6", black print on two (2) sides, color insert, design of certificate is prescribed by Secretary of State.

Vendor will:

- 1) Print certificate blank stock
- 2) Print data onto blank stock certificates
- 3) Mail certificates (postage) to voters both inside and outside of the U.S.

Data to be printed will be provided by Collin County Elections Administrator. See Line Item #2: FORM 17-7 (M11), VOTER REGISTRATION CERTIFICATE FOR SAMPLES OF FORM.  
(See Attachment B)

Bidder shall state the price for quantity of one (1) each in the space provided, estimating approximately 735,000 per MASS MAILOUT.

Please note quantity per MASS MAILOUT is approximate estimate, vendor is to invoice on actual number of certificates mailed.

(Response required)

Quantity: 735000 UOM: each Unit Price: \$  Total: \$

Item Notes: **THIS WILL BE AWARDED ALONG WITH LINE #2 TO ONE VENDOR.**

Supplier Notes: \_\_\_\_\_  
\_\_\_\_\_

No bid  
 Additional notes  
(Attach separate sheet)

4 FORM 17.2021SE.I3 (M49), TEXAS VOTER REGISTRATION APPLICATION (ENGLISH ONLY). 67# Vellum Bristol (White) with black print on two (2) sides, with intelligent barcode and postal permit. Flat size 6" x 9-1/2" with two (2) folds, one at 1-1/2" at top and another at 5-1/2" from top. Finish size folds to 6" x 4" (double postcard). 1/2" Glue strip at top inside of card.  
(See Attachment C)

Estimated annual usage: 100,000.

Bidder shall state the price for quantity of one (1) each for a quantity break of 50,001 - 100,000 in the space provided.

Bidder shall state the price of one (1) each for All Item Attribute quantity breaks for informational purposes only. All pricing, including item attributes, shall be held firm through the contract term.

**All attributes must be bid upon to be considered for award of the line.**

*(Response required)*

Quantity: 100000 UOM: each Unit Price: \$  Total: \$

Supplier Notes: \_\_\_\_\_  
\_\_\_\_\_

No bid  
 Additional notes  
*(Attach separate sheet)*

**Item Attributes**

**1. Quantity (Each Price)**

20,000 - 30,000

\$

*(Required: Numbers only)*

**2. Quantity (Each Price)**

30,001 - 40,000

\$

*(Required: Numbers only)*

**3. Quantity (Each Price)**

40,001 - 50,000

\$

*(Required: Numbers only)*

**5** FORM 17.2021S.I3 (M49), TEXAS VOTER REGISTRATION APPLICATON (SPANISH ONLY). 67# Vellum Bristol (White) with black print on two (2) sides, with intelligent barcode and postal permit. Flat size 6" x 9-1/2" with two (2) folds, one at 1-1/2" at top and another at 5-1/2" from top. Finish size folds to 6" x 4" (double postcard). 1/2" Glue strip at top inside of card.  
(See Attachments D)

Estimated annual usage: 50,000.

Bidder shall state the price for quantity of one (1) each for a quantity break of 40,001 - 50,000 in the space provided.

Bidder shall state the price of one (1) each for All Item Attribute quantity breaks for informational purposes only. All pricing, including item attributes, shall be held firm through the contract term.

**All attributes must be bid upon to be considered for award of the line.**

*(Response required)*

Quantity: 50000 UOM: each Unit Price: \$  Total: \$

Supplier Notes: \_\_\_\_\_  
\_\_\_\_\_

No bid  
 Additional notes  
*(Attach separate sheet)*

**Item Attributes**

**1. Quantity (Each Price)**

20,000 -30,000

\$

*(Required: Numbers only)*

**2. Quantity (Each Price)**

30,001 - 40,000

\$

*(Required: Numbers only)*

**6** FORM 17-38 (M50), DEPUTY VOTER REGISTRATION APPLICATON, 90 lb. index, 11" x 6" green card with black print on two (2) sides. One side to be printed IN ENGLISH and one side to be printed IN SPANISH. Two (2) perforations at one end of the card.  
(See Attachment E)

Estimated annual usage: 80,000.

Bidder shall state the price for quantity of one (1) each for a quantity break of 50,001 - 80,000 in the space provided.

Bidder shall state the price of one (1) each for All Item Attribute quantity breaks for informational purposes only. All pricing, including item attributes, shall be held firm through the contract term.

**All attributes must be bid upon to be considered for award of the line.**

*(Response required)*

Quantity: 80000 UOM: each Unit Price: \$  Total: \$

Supplier Notes: \_\_\_\_\_  
\_\_\_\_\_

No bid  
 Additional notes  
*(Attach separate sheet)*

**Item Attributes**

**1. Quantity (Each Price)**

20,000 - 30,000

\$

(Required: Numbers only)

**2. Quantity (Each Price)**

30,001 - 50,000

\$

(Required: Numbers only)

**7** FORM ABBME, APPLICATION FOR BALLOT BY MAIL (ENGLISH ONLY), 8-1/2 x 11, 125 LB White Tag. Printed in black ink on two (2) sides. Middle fold line lightly scored, with 1/2" permanent adhesive seal on top of form. 1/2" perforation on both top and bottom of form for easy seal removal, and an Official Election Mail Logo as per sample.  
(See Attachment F)

Estimated annual usage: 50,000.

Bidder shall state the price for quantity of one (1) each for a quantity break of 40,001 - 50,000 in the space provided.

Bidder shall state the price of one (1) each for All Item Attribute quantity breaks for informational purposes only. All pricing, including item attributes, shall be held firm through the contract term.

**All attributes must be bid upon to be considered for award of the line.**

(Response required)

Quantity: 50000 UOM: each Unit Price: \$  Total: \$

Supplier Notes: \_\_\_\_\_  
\_\_\_\_\_

No bid  
 Additional notes  
(Attach separate sheet)

**Item Attributes**

**1. Quantity (Each Price)**

20,000 - 30,000

\$

(Required: Numbers only)

**2. Quantity (Each Price)**

30,001 - 40,000

\$

(Required: Numbers only)

**8** FORM ABBMS, APPLICATION FOR BALLOT BY MAIL (SPANISH ONLY), 8-1/2 x 11, 125 LB White Tag. Printed in black ink on two (2) sides. Middle fold line lightly scored, with 1/2" permanent adhesive seal on top of form. 1/2" perforation on both top and bottom of form for easy seal removal, and an Official Election Mail Logo as per sample.  
(See Attachment G)

Estimated annual usage: 30,000.

Bidder shall state the price for quantity of one (1) each for a quantity break of 20,001 - 30,000 in the space provided.

Bidder shall state the price of one (1) each for All Item Attribute quantity breaks for informational purposes only. All pricing, including item attributes, shall be held firm through the contract term.

**All attributes must be bid upon to be considered for award of the line.**

*(Response required)*

Quantity: 30000 UOM: each Unit Price: \$  Total: \$

Supplier Notes: \_\_\_\_\_  
\_\_\_\_\_

No bid  
 Additional notes  
*(Attach separate sheet)*

**Item Attributes**

**1. Quantity (Each Price)**

5,000 - 10,000

\$

*(Required: Numbers only)*

**2. Quantity (Each Price)**

10,001 - 20,000

\$

*(Required: Numbers only)*

**9** FORM ABBMEL, APPLICATION FOR BALLOT BY MAIL (ENGLISH ONLY), 8-1/2 x 14, 125 LB White Tag. Printed in black ink on two (2) sides. Two (2) fold lines lightly scored, with 1/2" permanent adhesive snap-over seal at top of form. Official Election Mail Logo as per sample.  
(See Attachment H)

Estimated annual usage: 50,000.

Bidder shall state the price for quantity of one (1) each for a quantity break of 30,001 - 50,000 in the space provided.

Bidder shall state the price of one (1) each for All Item Attribute quantity breaks for informational purposes only. All pricing, including item attributes, shall be held firm through the contract term.

**All attributes must be bid upon to be considered for award of the line.**

*(Response required)*

Quantity: 50000 UOM: each Unit Price: \$  Total: \$

Supplier Notes: \_\_\_\_\_  
\_\_\_\_\_

No bid  
 Additional notes  
*(Attach separate sheet)*

**Item Attributes**

**1. Quantity (Each Price)**

10,000 -20,000

\$

*(Required: Numbers only)*

**2. Quantity (Each Price)**

20,001 - 30,000

\$

*(Required: Numbers only)*

**1  
0**

ENVELOPE #10 PLAIN. Printed in black ink, one (1) side only with Collin County logo, return address, and US Postal "OFFICIAL ELECTION MAIL" logo.  
(See Attachment I)

Estimated annual usage: 50,000.

Bidder shall state the price for quantity of one (1) each for a quantity break of 40,001 - 50,000 in the space provided.

Bidder shall state the price of one (1) each for All Item Attribute quantity breaks for informational purposes only. All pricing, including item attributes, shall be held firm through the contract term.

**All attributes must be bid upon to be considered for award of the line.**

*(Response required)*

Quantity: 50000 UOM: each Unit Price: \$  Total: \$

Supplier Notes: \_\_\_\_\_

No bid  
 Additional notes  
*(Attach separate sheet)*

**Item Attributes**

**1. Quantity (Each Price)**

20,000 - 30,000

\$

*(Required: Numbers only)*

**2. Quantity (Each Price)**

30,001 - 40,000

\$

*(Required: Numbers only)*

**1**  
**1** ENVELOPE #10 LEFT WINDOW. Printed in black ink, one (1) side only with Collin County logo, return address, and US Postal "OFFICIAL ELECTION MAIL" logo.  
(See Attachment J)

Estimated annual usage: 50,000.

Bidder shall state the price for quantity of one (1) each for a quantity break of 40,001 - 50,000 in the space provided.

Bidder shall state the price of one (1) each for All Item Attribute quantity breaks for informational purposes only. All pricing, including item attributes, shall be held firm through the contract term.

**All attributes must be bid upon to be considered for award of the line.**

*(Response required)*

Quantity: 50000 UOM: each Unit Price: \$  Total: \$

Supplier Notes: \_\_\_\_\_  
\_\_\_\_\_

No bid  
 Additional notes  
*(Attach separate sheet)*

**Item Attributes**

**1. Quantity (Each Price)**

20,000 - 30,000

\$

*(Required: Numbers only)*

**2. Quantity (Each Price)**

30,001 - 40,000

\$

*(Required: Numbers only)*

**1**  
**2** ENVELOPE #9 PLAIN. Printed in black ink, one (1) side only with Collin County logo, return address, US Postal "OFFICIAL ELECTION MAIL" logo. Printed with Business Reply Mail to Election Administrator. Includes intelligent barcode.  
(See Attachment K)

Estimated annual usage: 50,000.

Bidder shall state the price for quantity of one (1) each for a quantity break of 40,001 - 50,000 in the space provided.

Bidder shall state the price of one (1) each for All Item Attribute quantity breaks for informational purposes only. All pricing, including item attributes, shall be held firm through the contract term.

**All attributes must be bid upon to be considered for award of the line.**

*(Response required)*

Quantity: 20000 UOM: each Unit Price: \$  Total: \$

Supplier Notes: \_\_\_\_\_  
\_\_\_\_\_

No bid  
 Additional notes  
*(Attach separate sheet)*



## Item Attributes

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### 1. Quantity (Each Price)

20,000 - 30,000

\$

*(Required: Numbers only)*

### 2. Quantity (Each Price)

30,001 - 40,000

\$

*(Required: Numbers only)*

**Supplier Information**

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Company Name:

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Contact Name:

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Address:

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Phone:

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Fax:

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Email:

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**Supplier Notes**

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The undersigned hereby certifies the foregoing bid submitted by the company listed below hereinafter called "bidder" is the duly authorized agent of said company and the person signing said bid has been duly authorized to execute same. Bidder affirms that they are duly authorized to execute this contract; this company; corporation, firm, partnership or individual has not prepared this bid in collusion with any other bidder or other person or persons engaged in the same line of business; and that the contents of this bid as to prices, terms and conditions of said bid have not been communicated by the undersigned nor by any employee or agent to any other person engaged in this type of business prior to the official opening of this bid.

*Print Name*

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*Signature*

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## **1.0 GENERAL INSTRUCTIONS**

### 1.0.1 Definitions

1.0.1.1 Bidder: refers to submitter.

1.0.1.2 Vendor/Contractor/Provider: refers to a Successful Bidder/Contractor/Service Provider.

1.0.1.3 Submittal: refers to those documents required to be submitted to Collin County, by a Bidder.

1.0.1.4 IFB: refers to Invitation For Bid.

1.1 If Bidder does not wish to submit an offer at this time, please submit a No Bid.

1.2 Awards shall be made not more than ninety (90) days after the time set for opening of Submittals.

1.3 Collin County is always conscious and extremely appreciative of your time and effort in preparing your Submittal.

1.4 Collin County exclusively uses ionWave Technologies, Inc. (Collin County eBid) for the notification and dissemination of all solicitations. The receipt of solicitations through any other company may result in your receipt of incomplete specifications and/or addenda which could ultimately render your bid non-compliant. Collin County accepts no responsibility for the receipt and/or notification of solicitations through any other company.

1.5 A bid may not be withdrawn or canceled by the bidder prior to the ninety-first (91<sup>st</sup>) day following public opening of Submittals and only prior to award.

1.6 It is understood that Collin County, Texas reserves the right to accept or reject any and/or all Bids for any or all products and/or services covered in an Invitation For Bid (IFB), and to waive informalities or defects in Submittals or to accept such Submittals as it shall deem to be in the best interest of Collin County.

1.7 All IFBs submitted in hard copy paper form shall be submitted in a sealed envelope, plainly marked on the outside with the IFB number and name. A hard copy paper form Submittal shall be manually signed in ink by a person having the authority to bind the firm in a contract. Submittals shall be mailed or hand delivered to the Collin County Purchasing Department.

1.8 Submittals via email, oral, telegraphic or telephonic will not be accepted. IFBs may be submitted in electronic format via Collin County eBid.

1.9 All IFBs submitted electronically via Collin County eBid shall remain locked until official date and time of opening as stated in the Special Terms and Conditions of the IFB.

1.10 Time/date stamp clock in Collin County Purchasing Department shall be the official time of receipt for all IFBs submitted in hard copy paper form only, no flash drives, CD-ROMs or any other form of “plug and play” portable storage device will be accepted as a Submittal. IFBs received in the Collin County Purchasing Department after submission deadline shall be considered void and unacceptable. Absolutely no late Submittals will be considered. Collin County accepts no responsibility for technical difficulties related to electronic Submittals.

1.11 For hard copy paper form Submittals, any alterations made prior to opening date and time must be initialed by the signer of the IFB guaranteeing authenticity. Submittals cannot be altered or amended after submission deadline.

1.12 Collin County is by statute exempt from the State Sales Tax and Federal Excise Tax; therefore, the prices submitted shall not include taxes.

1.13 Any interpretations, corrections and/or changes to an IFB, and related Specifications or extensions to the opening/receipt date will be made by addenda to the respective document by the Collin County Purchasing Department. Questions and/or clarification requests must be submitted no later than the date specified in the solicitation. Those received at a later date may not be addressed prior to the public opening. Sole authority to authorize addenda shall be vested in Collin County Purchasing Agent as entrusted by the Collin County Commissioners Court. Addenda may be transmitted electronically via Collin County eBid.

1.13.1 Addenda will be transmitted to all that are known to have received a copy of the IFB/RFQ/RFP/RFI/CSP and related Specifications. However, it shall be the sole responsibility of the Bidder/Quoter/Offeror to verify issuance/non-issuance of addenda and to check all avenues of document availability (i.e. **Collin County eBid** <https://collincountvtx.ionwave.net/>, telephoning Purchasing Department directly, etc.) prior to opening/receipt date and time to insure Bidder's/Quoter's/Offeror's receipt of any addenda issued. Bidder/Quoter/Offeror shall acknowledge receipt of all addenda.

1.14 All materials and services shall be subject to Collin County approval.

1.15 Collin County reserves the right to make award in whole or in part as it deems to be in the best interest of the County.

1.16 Any reference to model/make and/or manufacturer used in specifications is for descriptive purposes only. Products/materials of like quality will be considered.

1.17 Bidders offering substitutions to the specifications shall do so at their own risk. By offering substitutions, Bidder shall state these in the section provided in the IFB or by attachment. Substitution, if accepted, must meet or exceed specifications stated therein. Collin County reserves the right to accept or reject any and/or all of the substitution(s) deemed to be in the best interest of the County.

1.19 Minimum Standards for Responsible Prospective Bidders: A prospective Bidder must meet the following minimum requirements:

1.19.1 have adequate financial resources, or the ability to obtain such resources as required;

1.19.2 be able to comply with the required or proposed delivery/completion schedule;

1.19.3 have a satisfactory record of performance;

1.19.4 have a satisfactory record of integrity and ethics;

1.19.5 be otherwise qualified and eligible to receive an award.

Collin County may request documentation and other information sufficient to determine Bidder's ability to meet these minimum standards listed above.

1.20 Vendor shall bear any/all costs associated with its preparation of an IFB.

1.21 Public Information Act: Collin County is governed by the Texas Public Information Act, Chapter 552 of the Texas Government Code. All information submitted by prospective Bidders during the bidding process is subject to release under the Act.

1.22 The Bidder shall comply with Commissioners Court Order No. 2004-167-03-11, County Logo Policy.

1.23 Interlocal Agreement: Successful Bidder agrees to extend prices and terms to all entities that has entered into or will enter into joint purchasing interlocal cooperation agreements with Collin County. Delivery to governmental entities located within Collin County will be at no additional charge or as otherwise provided for in the award document. Delivery charges, if any, for governmental entities located outside of Collin County shall be negotiated between the Vendor and each governmental entity.

1.24 Bid Openings: All bids submitted will be read at the County's regularly scheduled bid opening for the designated project. However, the reading of a bid at bid opening should be not construed as a comment on the responsiveness of such bid or as any indication that the County accepts such bid as responsive.

The County will make a determination as to the responsiveness of bids submitted based upon compliance with all applicable laws, Collin County Purchasing Guidelines, and project documents, including but not limited to the project specifications and contract documents. The County will notify the successful Bidder upon award of the contract and, according to state law; all bids received will be available for inspection at that time.

1.25 Bidder shall comply with all local, state and federal employment and discrimination laws and shall not discriminate against any employee or applicant for employment because of race, color, religion, sex, age, national origin or any other class protected by law.

## 2.0 TERMS OF CONTRACT

2.1 A bid, when properly accepted by Collin County, shall constitute a contract equally binding between the Vendor/Contractor/Provider and Collin County. No different or additional terms will become part of this contract with the exception of a Change Order.

2.2 No oral statement of any person shall modify or otherwise change, or affect the terms, conditions or specifications stated in the resulting contract. All Amendments and/or Change Orders to the contract will be made in writing by Collin County Purchasing Agent.

2.3 No public official shall have interest in the contract, in accordance with Vernon's Texas Codes Annotated, Local Government Code Title 5, Subtitle C, Chapter 171.

2.4 The Vendor/Contractor/Provider shall comply with Commissioners' Court Order No. 96-680-10-28, Establishment of Guidelines & Restrictions Regarding the Acceptance of Gifts by County Officials & County Employees.

2.5 Design, strength, quality of materials and workmanship must conform to the highest standards of manufacturing and engineering practice.

2.6 Bids must comply with all federal, state, county and local laws concerning the type(s) of product(s)/service(s)/equipment/project(s) contracted for, and the fulfillment of all ADA (Americans with Disabilities Act) requirements.

2.7 All products must be new and unused, unless otherwise specified, in first-class condition and of current manufacture. Obsolete products, including products or any parts not compatible with existing hardware/software configurations will not be accepted.

2.8 Vendor/Contractor/Provider shall provide any and all notices as may be required under the Drug-Free Work Place Act of 1988, 28 CFR Part 67, Subpart F, to its employees and all sub-contractors to insure that Collin County maintains a drug-free work place.

2.9 Vendor/Contractor/Provider shall defend, indemnify and save harmless Collin County and all its officers, agents and employees and all entities, their officers, agents and employees who are participating in this contract from all suits, claims, actions, damages (including personal injury and or property damages), or demands of any character, name and description, (including attorneys' fees, expenses and other defense costs of any nature) brought for or on account of any injuries or damages received or sustained by any person, persons, or property on account of Vendor/Contractor/Provider's breach of the contract arising from an award, and/or any negligent act, error, omission or fault of the Vendor/Contractor/Provider, or of any agent, employee, subcontractor or supplier of Vendor/Contractor/Provider in the execution of, or performance under, any contract which may result from an award. Vendor/Contractor/Provider shall pay in full any judgment with costs, including attorneys' fees and expenses which are rendered against Collin County and/or participating entities arising out of such breach, act, error, omission and/or fault.

2.10 Expenses for Enforcement. In the event either Party hereto is required to employ an attorney to enforce the provisions of this Agreement or is required to commence legal proceedings to enforce the provisions hereof, the prevailing Party shall be entitled to recover from the other, reasonable attorney's fees and court costs incurred in connection with such enforcement, including collection.

2.11 If a contract, resulting from a Collin County IFB is for the execution of a public work, the following shall apply:

2.11.1 In accordance with V.T.C.A. 2253.021, a governmental agency that makes a public work contract with a prime contractor shall require the contractor, before beginning work, to execute to the governmental entity a Payment Bond if the contract is in excess of \$25,000.00. Such bond shall

be in the amount of the contract payable to the governmental entity and must be executed by a corporate surety in accordance with Section 1, Chapter 87, Acts of the 56<sup>th</sup> Legislature, Regular Session, 1959 (Article 7.19-1 Vernon's Texas Insurance Code).

2.11.2 In accordance with V.T.C.A. 2253.021, a governmental agency that makes a public work contract with a prime contractor shall require the contractor, before beginning work, to execute to the governmental entity a Performance Bond if the contract is in excess of \$100,000.00. Such bond shall be in the amount of the contract payable to the governmental entity and must be executed by a corporate surety in accordance with Section 1, Chapter 87, Acts of the 56<sup>th</sup> Legislature, Regular Session, 1959 (Article 7.19-1 Vernon's Texas Insurance Code).

2.12 Purchase Order(s) shall be generated by Collin County to the vendor. Collin County will not be responsible for any orders placed/delivered without a valid purchase order number.

2.13 The contract shall remain in effect until any of the following occurs: delivery of product(s) and/or completion and acceptance by Collin County of product(s) and/or service(s), contract expires or is terminated by either party with thirty (30) days written notice prior to cancellation and notice must state therein the reasons for such cancellation. Collin County reserves the right to terminate the contract immediately in the event the Vendor/Contractor/Provider fails to meet delivery or completion schedules, or otherwise perform in accordance with the specifications. Breach of contract or default authorizes the County to purchase elsewhere and charge the full increase in cost and handling to the defaulting Vendor/Contractor/Provider.

2.14 Collin County Purchasing Department shall serve as Contract Administrator or shall supervise agents designated by Collin County.

2.15 All delivery and freight charges (FOB Inside delivery at Collin County designated locations) are to be included as part of the bid price. All components required to render the item complete, installed and operational shall be included in the total bid price. Collin County will pay no additional freight/delivery/installation/setup fees.

2.16 Vendor/Contractor/Provider shall notify the Purchasing Department immediately if delivery/completion schedule cannot be met. If delay is foreseen, the Vendor/Contractor/Provider shall give written notice to the Purchasing Agent. The County has the right to extend delivery/completion time if reason appears valid.

2.17 The title and risk of loss of the product(s) shall not pass to Collin County until Collin County actually receives and takes possession of the product(s) at the point or points of delivery. Collin County shall generate a purchase order(s) to the Vendor/Contractor/Provider and the purchase order number must appear on all itemized invoices.

2.18 Invoices shall be mailed directly to the Collin County Auditor's Office, 2300 Bloomdale Road, Suite 3100, McKinney, Texas 75071. All invoices shall show:

2.18.1 Collin County Purchase Order Number;

2.18.2 Vendor's/Contractor's/Provider's Name, Address and Tax Identification Number;

2.18.3 Detailed breakdown of all charges for the product(s) and/or service(s) including applicable time frames.

2.19 Payment will be made in accordance with V.T.C.A., Government Code, Title 10, Subtitle F, Chapter 2251.

2.20 All warranties shall be stated as required in the Uniform Commercial Code.

2.21 The Vendor/Contractor/Provider and Collin County agree that both parties have all rights, duties, and remedies available as stated in the Uniform Commercial Code.

- 2.22 The Vendor/Contractor/Provider agree to protect Collin County from any claims involving infringements of patents and/or copyrights.
- 2.23 The contract will be governed by the laws of the State of Texas. Should any portion of the contract be in conflict with the laws of the State of Texas, the State laws shall invalidate only that portion. The remaining portion of the contract shall remain in effect. The contract is performable in Collin County, Texas.
- 2.24 The Vendor/Contractor/Provider shall not sell, assign, transfer or convey the contract, in whole or in part, without the prior written approval from Collin County.
- 2.25 The apparent silence of any part of the specification as to any detail or to the apparent omission from it of a detailed description concerning any point, shall be regarded as meaning that only the best commercial practices are to prevail. All interpretations of the specification shall be made on the basis of this statement.
- 2.26 Vendor/Contractor/Provider shall not fraudulently advertise, publish or otherwise make reference to the existence of a contract between Collin County and Vendor/Contractor/Provider for purposes of solicitation. As exception, Vendor/Contractor/Provider may refer to Collin County as an evaluating reference for purposes of establishing a contract with other entities.
- 2.27 The Vendor/Contractor/Provider understands, acknowledges and agrees that if the Vendor/Contractor/Provider subcontracts with a third party for services and/or material, the primary Vendor/Contractor/Provider (awardee) accepts responsibility for full and prompt payment to the third party. Any dispute between the primary Vendor/Contractor/Provider and the third party, including any payment dispute, will be promptly remedied by the primary vendor. Failure to promptly render a remedy or to make prompt payment to the third party (subcontractor) may result in the withholding of funds from the primary Vendor/Contractor/Provider by Collin County for any payments owed to the third party.
- 2.28 Vendor/Contractor/Provider shall provide Collin County with diagnostic access tools at no additional cost to Collin County, for all Electrical and Mechanical systems, components, etc., procured through this contract.
- 2.29 Criminal History Background Check: If required, ALL individuals may be subject to a criminal history background check performed by Collin County prior to access being granted to Collin County facilities. Upon request, Vendor/Contractor/Provider shall provide list of individuals to the Collin County Purchasing Department within five (5) working days.
- 2.30 Non-Disclosure Agreement: Where applicable, vendor shall be required to sign a non-disclosure agreement acknowledging that all information to be furnished is in all respects confidential in nature, other than information which is in the public domain through other means and that any disclosure or use of same by vendor, except as provided in the contract/agreement, may cause serious harm or damage to Collin County. Therefore, Vendor agrees that Vendor will not use the information furnished for any purpose other than that stated in contract/agreement, and agrees that Vendor will not either directly or indirectly by agent, employee, or representative disclose this information, either in whole or in part, to any third party, except on a need to know basis for the purpose of evaluating any possible transaction. This agreement shall be binding upon Collin County and Vendor, and upon the directors, officers, employees and agents of each.
- 2.31 Vendors/Contractors/Providers must be in compliance with the Immigration and Reform Act of 1986 and all employees specific to this solicitation must be legally eligible to work in the United States of America.
- 2.32 Certification of Eligibility: This provision applies if the anticipated Contract exceeds \$100,000.00 and as it relates to the expenditure of federal grant funds. By submitting a bid or proposal in response to this solicitation, the Bidder certifies that at the time of submission, he/she is not on the Federal Government's list of suspended, ineligible, or debarred contractors. In the event of placement on the list between the time of bid/proposal submission and time of award, the Bidder will notify the Collin County Purchasing Agent. Failure to do so may result in terminating this contract for default.



2.33 Notice to Vendors/Contractors/Providers delivering goods or performing services within the Collin County Detention Facility: The Collin County Detention Facility houses persons who have been charged with and/or convicted of serious criminal offenses. When entering the Detention Facility, you could: (1) hear obscene or graphic language; (2) view partially clothed male inmates; (3) be subjected to verbal abuse or taunting; (4) risk physical altercations or physical contact, which could be minimal or possibly serious; (5) be exposed to communicable or infectious diseases; (6) be temporarily detained or prevented from immediately leaving the Detention Facility in the case of an emergency or “lockdown”; and (7) subjected to a search of your person or property. While the Collin County Sheriff’s Office takes every reasonable precaution to protect the safety of visitors to the Detention Facility, because of the inherently dangerous nature of a Detention Facility and the type of the persons incarcerated therein, please be advised of the possibility of such situations exist and you should carefully consider such risks when entering the Detention Facility. By entering the Collin County Detention Facility, you acknowledge that you are aware of such potential risks and willingly and knowingly choose to enter the Collin County Detention Facility.

2.34 Delays and Extensions of Time when applicable:

2.34.1 If the Vendor/Contractor/Provider is delayed at any time in the commence or progress of the Work by an act or neglect of the Owner or Architect/Engineer, or of an employee of either, or of a separate contractor employed by the Owner, or by changes ordered in the Work, or by labor disputes, fire, unusual delay in deliveries, unavoidable casualties or other causes beyond the Vendor/Contractor/Provider's control, or by delay authorized by the Owner pending mediation and arbitration, or by other causes which the Owner or Architect/Engineer determines may justify delay, then the Contract Time shall be extended by Change Order for such reasonable time as the Owner/Architect may determine.

2.34.2 If adverse weather conditions are the basis for a Claim for additional time, such Claim shall be documented by data substantiating that weather conditions were abnormal for the period of time and could not have been reasonably anticipated, and that the weather conditions had an adverse effect on the scheduled construction.

2.35 Disclosure of Certain Relationships: Chapter 176 of the Texas Local Government Code requires that any vendor considering doing business with a local government entity disclose the vendor’s affiliation or business relationship that might cause a conflict of interest with a local government entity. Subchapter 6 of the code requires a vendor to file a conflict of interest questionnaire (CIQ) if a conflict exists. By law this questionnaire must be filed with the records administrator of Collin County no later than the 7th business day after the date the vendor becomes aware of an event that requires the statement to be filed. A vendor commits an offense if the vendor knowingly violates the code. An offense under this section is a misdemeanor. By submitting a response to this request, the vendor represents that it is in compliance with the requirements of Chapter 176 of the Texas Local Government Code. Please send completed forms to the Collin County, County Clerk's Office located at 2300 Bloomdale Rd., Suite 2104, McKinney, TX 75071.

2.36 Disclosure of Interested Parties: Section 2252.908 of the Texas Government Code requires a business entity entering into certain contracts with a governmental entity to file with the governmental entity a disclosure of interested parties at the time the business entity submits the signed contract to the governmental entity. Section 2252.908 requires the disclosure form (Form 1295) to be signed by the authorized agent of the contracting business entity, acknowledging that the disclosure is made under oath and under penalty of perjury. Section 2252.908 applies only to a contract that requires an action or vote by the governing body of the governmental entity before the contract may be signed or has a value of at least \$1 million. Section 2252.908 provides definitions of certain terms occurring in the section. Section 2252.908 applies only to a contract entered into on or after January 1, 2016.

2.37 Vendors/Contractors/Providers must be in compliance with the provisions of Section 2252.152 and Section 2252.153 of the Texas Government Code which states, in part, contracts with companies engaged in business with Iran, Sudan, or Foreign Terrorist Organizations are prohibited. A governmental entity may not enter into a contract with a company that is listed on the Comptroller of the State of Texas website identified under Section 806.051, Section 807.051 or Section 2253.253 which do business with Iran, Sudan or any Foreign Terrorist Organization. This Act is effective September 1, 2017.

2.38 Force Majeure: No party shall be liable or responsible to the other party, nor be deemed to have defaulted under or breached this Agreement, for any failure or delay in fulfilling or performing any term of this Agreement, when and to the extent such failure or delay is caused by or results from acts beyond the affected party's reasonable control, including, without limitation: acts of God; flood, fire or explosion; war, invasion, riot or other civil unrest; actions, embargoes or blockades in effect on or after the date of this Agreement; or national or regional emergency (each of the foregoing, a "Force Majeure Event"). A party whose performance is affected by a Force Majeure Event shall give notice to the other party, stating the period of time the occurrence is expected to continue and shall use diligent efforts to end the failure or delay and minimize the effects of such Force Majeure Event.

**NOTE:** All other terms and conditions (i.e. Insurance Requirements, Bond Requirements, etc.) shall be stated in the individual IFB Solicitation documents as Special Terms, Conditions and Specifications.

**3.0 INSURANCE REQUIREMENTS**

3.1 Before commencing work, the vendor shall be required, at its own expense, to furnish the Collin County Purchasing Agent with certified copies of all insurance certificate(s) indicating the coverage to remain in force throughout the term of this contract.

3.1.1 **Commercial General Liability** insurance including but not limited to the coverage indicated below. Coverage shall not exclude or limit Products/Completed Operations, Contractual Liability, or Cross Liability. Coverage must be written on occurrence form.

- Each Occurrence: \$1,000,000
- Personal Injury & Adv. Injury: \$1,000,000
- Products/Completed Operation Aggregate: \$2,000,000
- General Aggregate: \$2,000,000

3.1.2 **Workers Compensation** insurance as required by the laws of Texas, and Employers' Liability.

Employers' Liability

- Liability, Each Accident: \$500,000
- Disease-Each Employee: \$500,000
- Disease – Policy Limit: \$500,000

3.1.3 **Commercial Automobile Liability** insurance which includes any automobile (owned, non-owned, and hired vehicles) used in connection with the contract.

- Combined Single Limit – Each Accident: \$1,000,000

3.1.4 **Professional/Errors & Omissions Liability** insurance with a two (2) year extended reporting period. If you choose to have project coverage endorsed onto your base policy, this would be acceptable.

- Each Occurrence/Aggregate: \$1,000,000

3.1.5 **Umbrella/Excess Liability** insurance.

- Each Occurrence/Aggregate: \$1,000,000

3.2 With reference to the foregoing insurance requirement, the vendor shall endorse applicable insurance policies as follows:

3.2.1 A waiver of subrogation in favor of Collin County, its officials, employees, volunteers and officers shall be provided for General Liability, Commercial Automobile Liability, and Workers' Compensation.

3.2.2 The vendor's insurance coverage shall name Collin County as additional insured under the General Liability policy.

3.2.3 All insurance policies shall be endorsed to require the insurer to immediately notify Collin County of any decrease in the insurance coverage limits.

3.2.4 All insurance policies shall be endorsed to the effect that Collin County will receive at least thirty (30) days notice prior to cancellation, non-renewal or termination of the policy.

3.2.5 All copies of Certificates of Insurance shall reference the project/contract number.

3.3 All insurance shall be purchased from an insurance company that meets the following requirements:

3.3.1 A financial rating of A-VII or higher as assigned by the BEST Rating Company or equivalent.

3.4 Certificates of Insurance shall be prepared and executed by the insurance company or its authorized agent, and shall contain provisions representing and warranting the following:

3.4.1 Sets forth all endorsements and insurance coverages according to requirements and instructions contained herein.

3.4.2 Sets forth the notice of cancellation or termination to Collin County.

#### **4.0 SPECIAL CONDITIONS AND SPECIFICATIONS**

4.1 **Authorization:** By order of the Commissioners Court of Collin County, Texas, sealed bids will be received for Printing: Specialized Election Forms.

4.2 **Purpose:** The intended purpose for this Invitation for Bid is to describe the various printing jobs required by the Elections Department.

4.3 **Term:** Successful vendor(s) will be awarded a twelve (12) month contract, effective from date of award. At Collin County's option and approval by the vendor, the contract may be renewed for four (4) additional one (1) year periods.

4.3.1 **Transitional Period:** Upon normal completion of this contract, not to include termination for default, and in the event that no new contract has been awarded by the original expiration date of the existing contract including any extension thereof, it shall be incumbent upon the Contractor to continue the contract under the same terms and conditions until a new contract can be completely operational. At no time shall this transition period extend more than ninety (90) days beyond the original expiration date of the existing contract any extension thereof.

4.4 **Sample Review:** This printing bid includes various items and forms, Attachments A-K. Bidder shall assume sole responsibility for viewing these samples in order to submit a bid consistent with the requirements of the County. Failure to do will result in rejection of bid. When a discrepancy occurs between specifications and sample, the sample shall prevail. **Samples will be made available for review January 24, 2023 through February 9, 2023, between the hours of 9:00 AM - 4:00 PM, Monday through Friday (excluding County Holidays) in the Purchasing Department, Jack Hatchell Administration Building, 2300 Bloomdale Rd., Ste. 3160, McKinney, TX. 75071.** PDF copies attached, refer to Attachments A-K.

4.5 **Funding:** Funds for payment have been provided through the Collin County budget approved by the Commissioners Court for this fiscal year only. State of Texas statutes prohibit the County from any obligation of public funds beyond the fiscal year for which a budget has been approved.

4.6 **Price Reduction:** If during the life of the contract, the vendor's net prices to its customers for the same product(s) and/or services shall be reduced below the contracted price, it is understood and agreed that the County shall receive such price reduction.

4.7 **Price Redetermination:** A price redetermination may be considered by Collin County only at the anniversary date of the contract each year. All requests for price redetermination shall be in written form and shall include documents supporting price redetermination such as Manufacturer's direct cost, postage rates, Railroad Commission rates, Federal/State minimum wage law, Federal/State unemployment taxes, F.I.C.A., Insurance Coverage Rates, etc.

**The bidder's past experience of honoring contracts at the bid price will be an important consideration in the evaluation of the lowest and best bid.**

Collin County reserves the right to accept or reject any/all of the price redetermination as it deems to be in the best interest of the County.

4.8 **Delivery/Completion/Response Time:** Vendor shall place product(s) and/or complete services at the County's designated location within two (2) to three (3) weeks ARO. When a proof is requested by Purchasing, Collin County will allow an additional three (3) working days for delivery of order upon final approval of the proof by the user department and Purchasing.

4.9 **Delivery Requirements:** Successful bidder(s) shall deliver all completed work to the addresses listed on the County Purchase Order. Deliveries not matching "SHIP TO" address from Purchase Order shall be refused/rejected and returned to vendor for shipping to correct address. **No additional delivery fees will be paid by Collin County.**

4.10 **Testing:** Testing may be performed at the request of Collin County, by an agent so designated by the County, without expense to Collin County.

4.11 **Samples/Demos/Proofs:** When requested, samples/demos/proofs shall be furnished to the County at no additional expense. **The proof(s) shall be mailed, e-mailed or faxed to the Purchasing Department. The proof shall then be dated, signed by using department and returned to vendor prior to printing.**

4.12 **Approximate Usage:** Estimated annual quantities are given for each commodity. Approximate usage does not constitute an order, but only implies the probable quantity the County will use. Commodities will be ordered on an as-needed basis.

4.13 **Over Runs:** Collin County shall not pay for over-runs. Vendor is cautioned to provide only the quantity of print copies as stated on the Purchase Order. Any over-runs delivered to the County shall be considered as a donation and no additional fees will be allowed and/or paid.

4.14 **Pricing:** All pricing shall be placed in the designated area for each specific category. All pricing shall include any/all programming or other time required to produce and assemble product. Pricing shall include costs for materials, labor, typesetting, set up, forms, test samples, proofs, overprinting of data information and all other costs associated with the job. **No additional fees will be paid by Collin County.**

Bidder shall state the price of one (1) each for All Item Attribute quantity breaks for informational purposes only. All pricing, including item attributes, shall be held firm through the contract term.

4.15 **Artwork:** All artwork, layouts, plate negatives, proofs and all CD's (data and image) shall become the property of Collin County. **Upon request, a copy of all artwork and/or data referenced in this article shall be delivered to Collin County within seven (7) working days.**

4.16 **Evaluation and Award:** Award of the contract shall be made to the responsive bidder(s) who submits the lowest and best bid meeting specifications. Collin County reserves the right to award by item, or as a whole as deemed to be in the best interest of the County. The County intends to evaluate the award of each line by the price for the quantity break that includes the maximum amount. Attributes listing additional quantity breaks are for information purposes, with pricing expected to be held firm through the contract term. Collin County further reserves the right to a secondary awarded vendor for this contract.

The bidder's past experience of honoring contracts at the bid price as well as their past delivery history with Collin County, will be an important consideration in the evaluation of the lowest and best bid.

Bidders failing to provide the required information necessary for the evaluation of the bid may be considered non-responsive.

**4.17 Specifications:** Listed below are minimum requirements and are intended to govern the general printing services, including all material necessary for a finished product, which Collin County uses during the course of routine County business.

#### 4.17.1 MASS MAILOUT - LISTING OF REGISTERED VOTERS

Section 14.001 of the Texas Election Code requires that the voter registrar mail new voter registration certificate to all registered voters with an active, or "A", status. This mail out must be completed between November 15 and December 5 of each **odd-numbered year**, starting in 2023. The intent of the following specifications is to describe the printing needed to facilitate the above described mail-out.

**4.17.2 There are approximately 702,546 active voters in Collin County. The estimated number of active voters by November 2023 will be approximately 735,000. The Secretary of State will prescribe the color and design of the new certificates. (Approximate usage does not constitute an order, but only implies the probable quantity the County will use.)**

**Please note quantity per MASS MAILOUT is approximate estimate, vendor is to invoice on actual number of certificates mailed.**

**A sample of the current certificate is available for viewing in the Purchasing Department (see Article 4.4).**

4.17.3 The Elections office will produce a text file and record layout of the file. Fields are fixed lengths. File may be transferred to vendor via FTP or burned to a CD and available for pickup by the vendor. The record layout will be available by September 15.

4.17.4 Certificates shall be mailed first class with a "DO NOT FORWARD" message.

4.17.5 The zip code information provided by the Elections office is not a zip+4.

4.17.6 Vendor shall print barcode of the certificate number on the face of the certificate. Vendor shall also print barcode of the "Notice ID" number on the face of the certificate.

4.17.7 Information provided in files shall be utilized for no other purpose than to produce documents required herein. A test file will be provided to vendor for formatting purposes.

4.17.8 A test data file will be available from the Elections office at the date requested by the vendor. Live data file will be available approximately by November 30.

4.17.9 Samples and/or proofs must be made available to Collin County Elections Administrator from the test file within fourteen (14) days from receipt of file and must be approved in writing by Collin County Elections Administrator prior to actual printing. Corrected printing proof should be made available by vendor no later than three (3) days after delivery of original proof.

4.17.10 After correction has been made; the corrected proof shall be re-submitted by vendor for approval by Collin County Elections Administrator no later than three (3) days after delivery of re-submitted corrected printing proof.

4.17.11 Certificates shall be mailed by the vendor no later than December 5th.

4.17.12 Vendor shall bear all costs for required postage. Vendor shall provide Collin County with a written estimate for postage costs based upon postage rates at time of mailing and upon final approval of corrected printing proof. The County will issue a check to vendor for the estimated cost of mailing certificates. Vendor will mail certificates in accordance with election codes then bill for any additional postage or issue a refund for any unused portion within thirty (30) days of the mailing date of the certificates. Vendor shall provide to Collin County Elections Administrator a receipt, showing date of transaction, from the United States Post Office to verify postage expenditures.

#### 4.18 **ELECTION PRINTING SUPPLIES:**

4.18.1 ELECTION CODE SECTION 51.013 (Identification of printers for primary election or general election for state and county officers).

4.18.1.1 Each person who prints ballots or other election supplies for a primary election or the general election for state and county officers shall file a statement with the Secretary of State as provided by this section.

4.18.1.2 The statement must be filed not later than the 60<sup>th</sup> day before the date of the applicable election.

4.18.1.3 The statement must include:

4.18.1.3.1 the name, business address, and business telephone number of the printer;

4.18.1.3.2 the name and telephone number of any agent or employee of the printer who is designated to receive inquiries or issue information about the printing of ballots or other election supplies; and

4.18.1.3.3 the name and address of each client for whom the ballots or other supplies are printed, the voting methods for which the materials are printed for the client, and a description of the materials printed for the client.

4.18.1.3.4 The Secretary of State shall prescribe the form for the statement required by this section.





# **ATTACHMENT A**

# Instructions for Voting by Mail on Back

(Al Dorso: Instrucciones si vota por correo)

17-5 (12/21)

Prescribed by  
Secretary of State

## STATEMENT OF RESIDENCE

For persons whose residence address does not match voter registration address.

### CONSTANCIA DE DOMICILIO PERMANENTE

Para personas cuya dirección no coincide con la que aparece en la lista oficial de votantes inscritos.

**Last Name** Include suffix if any  
Apellido Incluir sufijo si lo hay  
(Jr., Sr., III)

**First Name**  
Nombre de pila

**Middle Name (If any)**  
Segundo nombre (si aplica)

**Former Name**  
Apellido anterior

**Residence Address: Street Address and Apartment Number, City, State, and Zip.**  
If none, describe where you live. (Do not include P.O. Box, Rural Route, or Business Address)  
Domicilio residencial: Número y calle, y número de apartamento, Ciudad, Estado, y Código postal. Si no existe un domicilio, describa donde vive (no incluya apartados postales, rutas rurales o dirección del trabajo).

**Gender (Optional)**  
Sexo (Opcativo)

**Male** Masculino

**Female** Femenino

**Mailing Address: Address, City, State, and Zip:** If mail cannot be delivered to your residence address. Dirección postal: Número y calle, y número de apartamento, Ciudad, Estado, y Código postal (si no se puede entregar correo en su domicilio residencial).

**Date of Birth: month, day, year**  
Fecha de Nacimiento: mes, día, año

<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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**City and County of Former Residence in Texas**

Ciudad y condado de residencia anterior en Texas

**City and County of Current Residence in Texas**

Ciudad y condado de residencia actual en Texas

**Telephone Number (Optional) Include Area Code**

Teléfono (Opcativo) – Incluya código de área

**Texas Driver's License No. or Texas Personal I.D. No. (Issued by the Department of Public Safety)**

No. de licencia de conducir de Texas o no. de identificación personal de Texas (Expedido por el Departamento de Seguridad Pública)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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**If no Texas Driver's License or Personal Identification, give last 4 digits of your Social Security Number.**

Si no tiene licencia de conducir de Texas o no. de identificación personal, proporcione los 4 últimos dígitos de su número de Seguro Social.

**I have not been issued a Texas Driver's License/Personal Identification Number or Social Security Number.**  
Yo no tengo una Licencia de conducir de Texas/Cédula de identidad personal de Texas o Número de Seguro Social.

**I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to one year in jail, a fine up to \$4,000, or both. Please read all three state-ments to affirm before signing.** Entiendo que el dar información falsa para obtener una tarjeta de registro electoral constituye un delito de perjurio bajo las leyes estatales y federales. La condena por este delito puede resultar en encarcelamiento de hasta un año de cárcel, una multa de hasta \$4,000, o ambas cosas. Por favor lea cada una de las tres declaraciones antes de firmar.

- I am a resident of this county and a U.S. citizen; and
  - I have not been finally convicted of a felony, or if a felon, I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
  - I have not been determined by a final judgment of a court exercising probate jurisdiction to be totally mentally incapacitated or partially mentally incapacitated without the right to vote.
- soy residente de este condado y ciudadano de los Estados Unidos; y
- no he sido finalmente condenado por un delito grave, o si soy un delincuente, he purgado mi pena por completo, incluyendo cualquier plazo de encarcelamiento, libertad condicional, supervisión, período de libertad condicional, o he sido indultado; y
- no he sido determinado por un fallo final de un tribunal que ejerce la jurisdicción testamentaria que estoy totalmente incapacitado mentalmente o parcialmente incapacitado mentalmente sin derecho a voto

X

Date

/ /

**Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.**

Firma del solicitante o su agente (apoderado) y relación de éste con el solicitante, o nombre en letra del molde del solicitante si la firma es la de un testigo, y fecha.

## VOTING BY MAIL:

The residence address on your application for ballot by mail does not match the residence address at which you are registered to vote or the voter registrar has received information which indicates that you may have moved. You must complete the enclosed statement of residence and return it in the carrier envelope with your marked (voted) ballot.

**If the statement of residence is not returned, your ballot will not be counted.**

Your statement of residence will be reviewed to determine that your permanent residence address is still in the political jurisdiction before your ballot is counted. The residence address on the application for ballot by mail must be the same as the residence address on the statement of residence. The statement of residence will be forwarded to the voter registrar to change your voter registration records. You will be mailed a new voting certificate indicating your new precinct (if applicable) and residence address.

If it is determined that your residence address listed on this form is in a different county, this form will be forwarded to the voter registrar of the new county to get your voter registration transferred. You will receive a new voting certificate from the voter registrar in your new county.

**You must sign the card. If you have any question you may call \_\_\_\_\_.**

## SI VOTA POR CORREO:

Ya que su solicitud de una boleta electoral postal contiene un domicilio o dirección permanente distinto al domicilio bajo cual está inscrito para votar, o ya que la Oficina del Registro Electoral tiene información que indica que usted se ha mudado, será necesario que complete la Constancia de domicilio permanente aquí incluida, y que la devuelva con su boleta electoral completada (o sea, en la que ha marcado su voto) en el sobre proporcionado.

**Si no nos envía la Constancia de domicilio permanente, su voto no se incluirá en el conteo final.**

Antes de incluir sus votos en el conteo final, se verificará que su nuevo domicilio permanente aún queda dentro de la jurisdicción apropiada. El domicilio postal indicado en la solicitud de una boleta postal tiene que ser el mismo que aparece en la Constancia de domicilio permanente. Esta Constancia será enviada a las Oficinas del Registro Electoral para que las actas de inscripción electoral sean modificadas y Ud. recibirá una cédula electoral nueva que indicará el número de su nuevo recinto electoral, si esto fuera a cambiarse, y su nuevo domicilio permanente.

Si se determina que su residencia anotada en este formulario se ubica en otro condado, este formulario se enviará a la Oficina del Registro Electoral del nuevo condado para transferir su inscripción electoral. Usted recibirá una nueva cédula electoral de la Oficina del Registro Electoral de su nuevo condado.

**Es necesario que firme la tarjeta.**

**Para mayor información o para aclarar cualquier duda, por favor llame al \_\_\_\_\_.**


# **ATTACHMENT D**

VOTER REGISTRAR  
 800-687-8546 / 972-547-1990  
 2010 REDBUD BLVD., SUITE 102  
 MCKINNEY, TEXAS 75069  
 www.collincountytx.gov



Secretary of State's Office  
 Elections Division  
 1-800-252-VOTE (8683)

**RETURN SERVICE REQUESTED**


 <b>VOTER REGISTRATION CERTIFICATE</b> (Certificado de Registro Electoral) <b>COLLIN COUNTY</b> (Condado de Collin)			CONGRESS (Congreso)	STATE SENATE (Sen. Estatal)	STATE REP (Rep. Estatal)	COM	J.P.
VOID (VUID)	Gender (Sexo)	Valid from (Válido desde)	CITY (Ciudad)	CITY DIST. (Ciudad dist.)	ISD (escuela)	ISD DIST. (escuela dist.)	SBOE
Year of Birth (Año de Nacimiento)	Prec. No. (Núm. Pcto.)	thru (hasta)					
Name and Permanent Residence Address (Nombre y dirección residencial permanente)			Name and Mailing Address (Nombre y dirección de correo)				
<b>X</b> VOTER MUST PERSONALLY SIGN HIS/HER NAME IMMEDIATELY UPON RECEIPT, IF ABLE (El votante debe firmar esta tarjeta personalmente al recibirla, si puede.)			Party Affiliation (Afiliación del Partido)				

VOTER REGISTRAR  
 800-687-8546 / 972-547-1990  
 2010 REDBUD BLVD., SUITE 102  
 MCKINNEY, TEXAS 75069  
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Secretary of State's Office  
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**RETURN SERVICE REQUESTED**

 <b>VOTER REGISTRATION CERTIFICATE</b> (Certificado de Registro Electoral) <b>COLLIN COUNTY</b> (Condado de Collin)			CONGRESS (Congreso)	STATE SENATE (Sen. Estatal)	STATE REP (Rep. Estatal)	COM	J.P.
VOID (VUID)	Gender (Sexo)	Valid from (Válido desde)	CITY (Ciudad)	CITY DIST. (Ciudad dist.)	ISD (escuela)	ISD DIST. (escuela dist.)	SBOE
Year of Birth (Año de Nacimiento)	Prec. No. (Núm. Pcto.)	thru (hasta)					
Name and Permanent Residence Address (Nombre y dirección residencial permanente)			Name and Mailing Address (Nombre y dirección de correo)				
<b>X</b> VOTER MUST PERSONALLY SIGN HIS/HER NAME IMMEDIATELY UPON RECEIPT, IF ABLE (El votante debe firmar esta tarjeta personalmente al recibirla, si puede.)			Party Affiliation (Afiliación del Partido)				

Voters who possess one of the following forms of photo identification that is not expired more than 4 years must show it to vote in person:

1) Texas Driver License; 2) Texas Election Identification Certificate; 3) Texas Personal Identification Card; 4) Texas Handgun License; 5) U.S. military ID card containing the voter's photo; 6) U.S. Citizenship Certificate containing the voter's photo; or 7) U.S. passport. Voters who do not possess an acceptable form of photo identification and cannot reasonably obtain one, may show a supporting form of identification (a complete list is available at [www.votetexas.gov](http://www.votetexas.gov)) and execute a Reasonable Impediment Declaration to vote in person. Voters with disabilities, religious objections to being photographed, and those affected by certain natural disasters, may also qualify for other exceptions. It is a criminal offense to intentionally and knowingly make a false statement on a Reasonable Impediment Declaration or knowingly impersonate another person and vote or attempt to vote as that person.

If you move within your county, you may update your information online at [texas.gov](http://texas.gov), or if any information on this certificate changes or is incorrect, correct the information in the space provided, sign below, and return this certificate to the voter registrar. If you move to a new county, you **MUST** re-register by completing and providing a new voter registration application to your new county. You will receive a new voter registration certificate for each written update or completed registration application submitted. Every two years, you will receive your voter registration certificate, unless it has been canceled properly under law.

**Please visit [www.votetexas.gov](http://www.votetexas.gov) or contact your voter registrar for additional and updated information on voter ID requirements, including a complete list of acceptable supporting identification or to obtain a voter registration application.**

Votantes que poseen una de las siguientes formas de identificación con fotografía que no haya expirado hace más de 4 años, deben presentarla para votar en persona: 1) Licencia de Conducir de Texas; 2) Certificado de Identificación Electoral de Texas; 3) Tarjeta de Identificación Personal de Texas; 4) Licencia para portar Armas de Fuego de Texas; 5) Cédula de identificación militar de los Estados Unidos con foto del votante; 6) Certificado de Ciudadanía de los Estados Unidos con foto del votante; o 7) Pasaporte de los Estados Unidos. Votantes que no poseen una forma aceptable de identificación con fotografía y que no pueden razonablemente obtener una, pueden presentar una forma de identificación adicional (una lista completa está disponible en [www.votetexas.gov](http://www.votetexas.gov)) y llenar una Declaración de Impedimento Razonable para votar en persona. Votantes con discapacidades, objeciones religiosas a ser fotografiados, y aquellos afectados por ciertos desastres naturales también pueden calificar para otras excepciones. Es un delito criminal hacer una declaración falsa de forma consciente e intencional en una Declaración de Impedimento Razonable o hacerse pasar por otra persona de forma consciente y votar o intentar votar como tal persona.

Si se muda dentro de su condado, puede actualizar su información por internet en [texas.gov](http://texas.gov), o si alguna información en este certificado cambia o es incorrecta, corrija la información en el espacio proporcionado, firme abajo, y devuelva este certificado al registrador de votantes. Si se muda a un nuevo condado, **deberá** volver a registrarse completando y proporcionando una nueva solicitud de registro de votante a su nuevo condado. Usted recibirá un nuevo certificado por cada actualización escrita o solicitud de registro completada y enviada. Cada dos años, recibirá su certificado de votante, a menos que su registro de votante haya sido cancelado apropiadamente de acuerdo a la ley.

**Por favor visite [www.votetexas.gov](http://www.votetexas.gov) o comuníquese con su registrador de votantes para obtener información adicional y actualizada sobre los requisitos de identificación de votantes, incluyendo una lista completa de identificación aceptable o para obtener una solicitud de registro de votantes.**

I affirm the changes made to the left are correct.

Afirmo que los cambios hechos al lado izquierdo están correctos.

Signature of Voter (Firma del votante)

Voters who possess one of the following forms of photo identification that is not expired more than 4 years must show it to vote in person:

1) Texas Driver License; 2) Texas Election Identification Certificate; 3) Texas Personal Identification Card; 4) Texas Handgun License; 5) U.S. military ID card containing the voter's photo; 6) U.S. Citizenship Certificate containing the voter's photo; or 7) U.S. passport. Voters who do not possess an acceptable form of photo identification and cannot reasonably obtain one, may show a supporting form of identification (a complete list is available at [www.votetexas.gov](http://www.votetexas.gov)) and execute a Reasonable Impediment Declaration to vote in person. Voters with disabilities, religious objections to being photographed, and those affected by certain natural disasters, may also qualify for other exceptions. It is a criminal offense to intentionally and knowingly make a false statement on a Reasonable Impediment Declaration or knowingly impersonate another person and vote or attempt to vote as that person.

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**Please visit [www.votetexas.gov](http://www.votetexas.gov) or contact your voter registrar for additional and updated information on voter ID requirements, including a complete list of acceptable supporting identification or to obtain a voter registration application.**

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**Por favor visite [www.votetexas.gov](http://www.votetexas.gov) o comuníquese con su registrador de votantes para obtener información adicional y actualizada sobre los requisitos de identificación de votantes, incluyendo una lista completa de identificación aceptable o para obtener una solicitud de registro de votantes.**

I affirm the changes made to the left are correct.


Afirmo que los cambios hechos al lado izquierdo están correctos.

Signature of Voter (Firma del votante)

Name, Voter Registrar  
Telephone Number  
Address  
City, State, Zip

Secretary of State's Office  
Elections Division  
1-800-252-VOTE (8683)


**RETURN SERVICE REQUESTED**

 <b>VOTER REGISTRATION CERTIFICATE</b> (Certificado de Registro Electoral)												
COUNTY (Condado)												
<b>VUID (VUID)</b>  <b>Year of Birth (Año de Nacimiento)</b>	<b>Gender (Sexo)</b>  <b>Prec. No. (Núm. Pcto.)</b>	<b>Valid from (Válido desde)</b>  <b>thru (hasta)</b>										
<b>Name and Permanent Residence Address (Nombre y dirección residencial permanente)</b>												
<p><b>X</b></p> <b>VOTER MUST PERSONALLY SIGN HIS/HER NAME IMMEDIATELY UPON RECEIPT, IF ABLE</b> (El votante debe firmar esta tarjeta personalmente al recibirla, si puede.)												
Party Affiliation (Afiliación del Partido)												
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<b>Name and Mailing Address (Nombre y dirección de correo)</b>												

Name, Voter Registrar  
Telephone Number  
Address  
City, State, Zip

Secretary of State's Office  
Elections Division  
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Name, Voter Registrar  
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<b>Name and Mailing Address (Nombre y dirección de correo)</b>												



[REDACTED]

[REDACTED]

[REDACTED]

Voter identification requirements are under court review and may change. Voters who possess one of the following forms of photo identification that is not expired more than 4 years must show it to vote in person: 1) Texas driver license; 2) Texas election identification certificate; 3) Texas personal identification card; 4) Texas handgun license; 5) U.S. military ID card containing the voter's photo; 6) U.S. citizenship certificate containing the voter's photo; or 7) U.S. passport. Voters who do not possess an acceptable form of photo identification and cannot reasonably obtain one, may show a supporting form of identification (a complete list is available at www.votetexas.gov) and execute a Reasonable Impediment Declaration to vote in person. Voters with disabilities, religious objections to being photographed, and those affected by certain natural disasters, may also qualify for other exceptions. It is a criminal offense to intentionally and knowingly make a false statement on a Reasonable Impediment Declaration or knowingly impersonate another person and vote or attempt to vote as that person.

If you move within your county, or if any information on this certificate changes or is incorrect, correct the information in the space provided, sign below, and return this certificate to the voter registrar. If you move to a new county, you **must** re-register by completing and providing a new voter registration application to your new county. You will receive a new certificate for each written update or completed registration application submitted, as well as every two years as long as your voter registration is not cancelled by law.

**Please visit [www.votetexas.gov](http://www.votetexas.gov) or contact your voter registrar for additional and updated information on voter ID requirements, including a complete list of acceptable supporting identification or to obtain a voter registration application.**

Los requisitos de identificación para votantes están bajo revisión judicial y pueden cambiar. Votantes que poseen una de las siguientes formas de identificación con fotografía que no haya expirado hace más de 4 años, deben presentarlo para votar en persona: 1) licencia de conducir de Texas; 2) certificado de identificación electoral de Texas; 3) tarjeta de identificación personal de Texas; 4) licencia para portar armas de fuego de Texas; 5) cédula de identificación militar de los Estados Unidos con foto del votante; 6) certificado de ciudadanía de los Estados Unidos con foto del votante; o 7) pasaporte de los Estados Unidos. Votantes que no poseen una forma aceptable de identificación con fotografía y que no pueden razonablemente obtener una, pueden presentar una forma de identificación adicional (una lista completa está disponible en [www.votetexas.gov](http://www.votetexas.gov)) y llenar una Declaración de Impedimento Razonable para votar en persona. Votantes con discapacidades, objeciones religiosas a ser fotografiados, y aquellos afectados por ciertos desastres naturales también pueden calificar para otras excepciones. Es un delito criminal hacer una declaración falsa de forma consciente e intencional en una Declaración de Impedimento Razonable o hacerse pasar por otra persona de forma consciente y votar o intentar votar como tal persona.

Si se muda dentro de su condado, o si alguna información en este certificado cambia o es incorrecta, corrija la información en el espacio proporcionado, firme abajo, y devuelva este certificado al registrador de votantes. Si se muda a un nuevo condado, **deberá** volver a registrarse al completar y proporcionar una nueva solicitud de registro de votante a su nuevo condado. Usted recibirá un nuevo certificado para cada actualización escrita o solicitud de registro completada y enviada, así como cada dos años, siempre y cuando su registro de votante no sea cancelado por ley.

**Por favor visite [www.votetexas.gov](http://www.votetexas.gov) o comuníquese con su registrador de votantes para obtener información adicional y actualizada sobre los requisitos de identificación de votantes, incluyendo una lista completa de identificación aceptable o para obtener una solicitud de registro de votantes.**

\_\_\_\_\_

\_\_\_\_\_

**I affirm the changes made to the left are correct.**  
Afirmo que los cambios hechos al lado izquierdo están correctos.

**X**  
Signature of Voter (Firma del votante)

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\_\_\_\_\_

\_\_\_\_\_

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**X**  
Signature of Voter (Firma del votante)

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**Por favor visite [www.votetexas.gov](http://www.votetexas.gov) o comuníquese con su registrador de votantes para obtener información adicional y actualizada sobre los requisitos de identificación de votantes, incluyendo una lista completa de identificación aceptable o para obtener una solicitud de registro de votantes.**

\_\_\_\_\_

\_\_\_\_\_

**I affirm the changes made to the left are correct.**  
Afirmo que los cambios hechos al lado izquierdo están correctos.

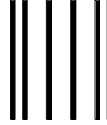
**X**  
Signature of Voter (Firma del votante)

# **ATTACHMENT E**

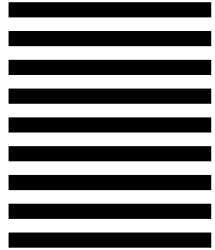


County of Residence

*Fold on line and seal before mailing*



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES



**BUSINESS REPLY MAIL**

FIRST-CLASS MAIL PERMIT NO. 4511 AUSTIN TX

POSTAGE WILL BE PAID BY ADDRESSEE

COLLIN COUNTY  
REGISTRAR OF VOTERS  
2010 REDBUD BLVD STE 102  
MCKINNEY TX 75069-9930



*Fold on line and seal before mailing*

**Qualifications**

- You must register to vote in the county in which you reside.
- You must be a citizen of the United States.
- You must be at least 17 years and 10 months old to register, and you must be 18 years of age by Election Day.
- You must not be finally convicted of a felony, or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.
- You must not have been determined by a final judgment of a court exercising probate jurisdiction to be totally mentally incapacitated or partially mentally incapacitated without the right to vote.

**Filling out the Application**

- Review the application carefully, fill it out, sign and date it and mail it to the voter registrar in your county or drop it by the Voter Registrar's office.

- All voters who register to vote in Texas must provide a Texas driver's license number or personal identification number issued by the Texas Department of Public Safety. If you don't have such a number, simply provide the last four digits of your social security number. If you don't have a social security number, you need to state that fact.
- Your voter registration will become effective 30 days after it is received or on your 18th birthday, whichever is later. Your registration must be effective on or before an election day in order to vote in that election.
- If you move to another county, you must re-register in the county of your new residence.

Please visit the Texas Secretary of State website, [www.sos.state.tx.us](http://www.sos.state.tx.us), and for additional election information visit [www.votetexas.gov](http://www.votetexas.gov).

Este formulario está disponible en español. Favor de llamar a su registrador de votantes local para conseguir una versión en español.



# Texas Voter Registration Application

For Official Use Only

Prescribed by the Office of the Secretary of State

VR17.2021E.I3

Please complete sections by printing LEGIBLY. If you have any questions about how to fill out this application, please call your local voter registrar.

## 1 These Questions Must Be Completed Before Proceeding (Check one)

- New Application       Change of Address, Name, or Other Information       Request for a Replacement Card

Are you a United States Citizen?       Yes       No

Will you be 18 years of age on or before election day?       Yes       No

If you checked 'No' in response to either of the above, do not complete this form.

Are you interested in serving as an election worker?       Yes       No

<b>2</b> Last Name Include Suffix if any (Jr, Sr, III)	First Name	Middle Name (If any)	Former Name (if any)
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<b>3</b> Residence Address: Street Address and Apartment Number. If none, describe where you live. (Do not include P.O. Box, Rural Rt. or Business Address)	City	TEXAS
	County	Zip Code

<b>4</b> Mailing Address: Street Address and Apartment Number. (If mail cannot be delivered to your residence address.)	City	State
		Zip Code

## 5 City and County of Former Residence in Texas

<b>6</b> Date of Birth: (mm/dd/yyyy)	<b>7</b> Gender (Optional)	<b>8</b> Telephone Number (Optional) Include Area Code
<input type="text"/>	<input type="checkbox"/> Male <input type="checkbox"/> Female	( <input type="text"/> ) <input type="text"/> - <input type="text"/>

<b>9</b> Texas Driver's License No. or Texas Personal I.D. No. (Issued by the Department of Public Safety)	If no Texas Driver's License or Personal Identification, give last 4 digits of your Social Security Number
<input type="text"/>	XXX-XX- <input type="text"/>
<input type="checkbox"/> I have not been issued a Texas Driver's License/Personal Identification Number or Social Security Number.	

**10** I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to one year in jail, a fine up to \$4,000, or both. Please read all three statements to affirm before signing.

- I am a resident of this county and a U.S. citizen;
- I have not been finally convicted of a felony, or if a felon, I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- I have not been determined by a final judgment of a court exercising probate jurisdiction to be totally mentally incapacitated or partially mentally incapacitated without the right to vote.

X

Date    /    /

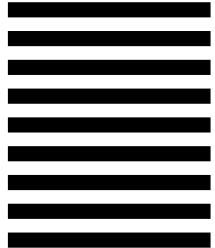
Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

# **ATTACHMENT F**

*Doble por la línea y selle antes de enviar*



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES



**BUSINESS REPLY MAIL**  
FIRST-CLASS MAIL PERMIT NO. 4511 AUSTIN TX

POSTAGE WILL BE PAID BY ADDRESSEE

COLLIN COUNTY  
REGISTRAR OF VOTERS  
2010 REDBUD BLVD STE 102  
MCKINNEY TX 75069-9930



*Doble por la línea y selle antes de enviar*

### Requisitos

- Debe registrarse para votar en el condado donde reside.
- Debe ser ciudadano de los Estados Unidos.
- Debe tener al menos 17 años con 10 meses de edad o más para registrarse, y debe tener 18 años de edad para el Día de las Elecciones.
- No debe haber sido finalmente condenado por un delito grave, o si es un delincuente, debe haber purgado la pena por completo, incluyendo cualquier plazo de encarcelamiento, libertad condicional, supervisión, período de libertad condicional, o debe haber recibido un indulto.
- No debe haber sido determinado por un fallo final de un tribunal que ejerce la jurisdicción testamentaria de estar totalmente incapacitado mentalmente o parcialmente incapacitado mentalmente sin derecho a voto.

### Llenar la Solicitud

- Revise la solicitud cuidadosamente, rellénella, fírmela y féchela y envíela por correo al registrador de votantes de su condado o llévela a la oficina del Registrador de Votantes.

- Todos los votantes que se registren para votar en Texas deben proporcionar un número de licencia de conducir de Texas o un número de identificación personal emitido por el Departamento de Seguridad Pública de Texas. Si no tiene dicho número, simplemente proporcione los últimos cuatro dígitos de su número de seguro social. Si no tiene un número de seguro social, tiene que indicar ese hecho.
- Su registro de votante entrará en vigor 30 días después de su recepción o cuando cumpla los 18 años, lo que ocurra más tarde. Su registro debe entrar en vigor el día de las elecciones o antes para poder votar en esa elección.
- Si se muda a otro condado, debe volver a registrarse en el condado de su nueva residencia.

Por favor, visite el sitio web de la Secretaría de Estado de Texas, [www.sos.state.tx.us](http://www.sos.state.tx.us), y para información electoral adicional visite [www.votetexas.gov](http://www.votetexas.gov).

This application is available in English. Please contact your local voter registrar to receive a copy in English.

# Solicitud de Registro Electoral en Texas

Exclusivo para uso oficial

Prescribed by the Office of the Secretary of State

VR17.2021S.I3

Favor de llenar cada sección con letra de molde LEGIBLE. Si tiene preguntas sobre cómo llenar este formulario, por favor comuníquese con su registrador de votantes local.

## 1 Debe contestar estas preguntas antes de proseguir (Marque un recuadro)

Nueva solicitud       Cambio de dirección, nombre, u otra información       Reemplazo de tarjeta

¿Es usted ciudadano de los Estados Unidos?       Sí       No

¿Tendrá 18 años cumplidos antes o el día de la elección?       Sí       No

Si marcó 'No' como respuesta a cualquiera de las preguntas anteriores no llene esta solicitud.

¿Tiene interés en participar como trabajador electoral?       Sí       No

<b>2</b> <b>Apellido</b> Incluir sufijo si lo hay (Jr, Sr, III)	<b>Primer nombre</b>	<b>Segundo nombre</b> (si aplica)	<b>Nombre anterior</b> (si aplica)
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<b>3</b> <b>Domicilio residencial:</b> Dirección y número de apartamento (si no se puede entregar el correo en su domicilio residencial).	<b>Ciudad</b>	<b>TEXAS</b>
	<b>Condado</b>	<b>Código postal</b>

<b>4</b> <b>Dirección postal:</b> Dirección y número de apartamento (si no se puede entregar el correo en su domicilio residencial).	<b>Ciudad</b>	<b>Estado</b>
		<b>Código postal</b>

## 5 Ciudad y condado de residencia anterior en Texas

<b>6</b> <b>Fecha de nacimiento:</b> (mm/dd/aaaa)	<b>7</b> <b>Sexo</b> (Optativo) <input type="checkbox"/> Masculino <input type="checkbox"/> Femenino	<b>8</b> <b>Teléfono</b> (Optativo) Incluya código de área ( ) - -
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<b>9</b> <b>Núm. de licencia de conducir de Texas o núm. de identificación personal de Texas</b> (Expedido por el Departamento de Seguridad Pública).	<b>Si no tiene licencia de conducir de Texas o núm. de identificación personal, proporcione los 4 últimos dígitos de su número de Seguro Social.</b>
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	XXX-XX- <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <b>No tengo licencia de conducir de Texas/Número de Identidad Personal de Texas ni un número de Seguro Social.</b>	

**10** Entiendo que el dar información falsa para obtener una tarjeta de registro electoral constituye un delito de perjurio bajo las leyes estatales y federales. La condena por este delito puede resultar en encarcelamiento de hasta un año de cárcel, una multa de hasta \$4,000, o ambas cosas. Por favor lea cada una de las tres declaraciones antes de firmar.

- Soy residente de este condado y ciudadano de los Estados Unidos;
- No he sido finalmente condenado por un delito grave, o si soy un delincuente, he purgado mi pena por completo, incluyendo cualquier plazo de encarcelamiento, libertad condicional, supervisión, período de libertad condicional, o he sido indultado; y
- No he sido determinado por un fallo final de un tribunal que ejerce la jurisdicción testamentaria que estoy totalmente incapacitado mentalmente o parcialmente incapacitado mentalmente sin derecho a voto.

**X**

Fecha / /

Firma del solicitante o su agente (apoderado) y relación de éste con el solicitante, o nombre en letra de molde del solicitante si la firma es la de un testigo, y fecha.



# **ATTACHMENT E**

Please complete sections by printing LEGIBLY. If you have any questions about how to fill out this application, please call your local voter registrar. Please visit the Texas Secretary of State website, [www.sos.state.tx.us](http://www.sos.state.tx.us), and for additional election information visit [www.votetexas.gov](http://www.votetexas.gov). Este formulario está disponible en español. Favor de llamar a su registrador de votantes local para conseguir una versión en español.

**Qualifications**

- You must register to vote in the county in which you reside.
- You must be a citizen of the United States.
- You must be at least 17 years and 10 months old to register, and you must be 18 years of age by Election Day.
- You must not be finally convicted of a felony, or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.
- You must not have been determined by a final judgment of a court exercising probate jurisdiction to be totally mentally incapacitated or partially mentally incapacitated without the right to vote.

**1 THESE QUESTIONS MUST BE COMPLETED BEFORE PROCEEDING (Check one)**

New Application                       Change of Address, Name, or Other Information                       Request for a Replacement Card

Are you a United States Citizen?  Yes     No                      Will you be 18 years of age on or before election day?  Yes     No

**If you checked 'No' in response to either of the above, do not complete this form.**

Are you interested in serving as an election worker?  Yes     No

<b>2 Last Name</b> Include Suffix if any (Jr, Sr, III)	<b>First Name</b>	<b>Middle Name</b> (If any)	<b>Former Name</b> (if any)
<b>3 Residence Address:</b> Street Address and Apartment Number. If none, describe where you live. (Do not include P.O. Box, Rural Rt. or Business Address)	<b>City</b>		<b>TEXAS</b>
	<b>County</b>		<b>Zip Code</b>
<b>4 Mailing Address:</b> Street Address and Apartment Number. (If mail cannot be delivered to your residence address.)	<b>City</b>		<b>State</b>
			<b>Zip Code</b>

**5 City and County of Former Residence in Texas**

<b>6 Date of Birth:</b> (mm/dd/yyyy)	<b>7 Gender</b> (Optional)	<b>8 Telephone Number</b> (Optional) Include Area Code
<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/> Male <input type="checkbox"/> Female	( <input type="text"/> <input type="text"/> <input type="text"/> ) <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

<b>9 Texas Driver's License No. or Texas Personal I.D. No.</b> (Issued by the Department of Public Safety)	<b>If no Texas Driver's License or Personal Identification, give last 4 digits of your Social Security Number</b>
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	XXX-XX- <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<input type="checkbox"/> I have not been issued a Texas Driver's License/Personal Identification Number or Social Security Number.	

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- I have not been determined by a final judgment of a court exercising probate jurisdiction to be totally mentally incapacitated or partially mentally incapacitated without the right to vote.

X

Date: \_\_\_\_\_

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

FOR VOLUNTEER DEPUTY REGISTRAR USE ONLY	
<b>Deputy Number</b>	Application must be delivered to Voter Registrar no later than <b>5 days</b> after receipt
_____	_____
Signature of Volunteer Deputy Registrar	Date

**REGISTRATION RECEIPT**

Name of Applicant/Applicant's Agent (if applicable)	Receipt No.:
Name of Volunteer Deputy Registrar	Deputy No.:
Signature of Volunteer Deputy Registrar	Date:

Favor de llenar cada sección con letra de molde LEGIBLE. Si tiene preguntas sobre cómo rellenar este formulario, por favor comuníquese con su registrador de votantes local. Por favor visite la página web de la Secretaría del Estado de Texas, [www.sos.state.tx.us](http://www.sos.state.tx.us), y para información adicional sobre elecciones visite [www.votetexas.gov](http://www.votetexas.gov). This application is available in English. Please contact your local voter registrar to receive a copy in English.

**Requisitos**

- Hay que registrarse para votar en el condado donde reside.
- Hay que ser ciudadano de los Estados Unidos.
- Hay que tener por lo menos 17 años con 10 meses de edad o más para registrarse, y hay que tener 18 años de edad para el Día de Elecciones.
- Hay que no haber sido condenado por un delito grave, o en caso de ser delincuente, haber purgado la pena por completo, incluyendo cualquier plazo de encarcelamiento, libertad condicional, supervisión, período de prueba, o haber obtenido un indulto.
- Hay que no haber sido declarado total ni parcialmente, como mentalmente discapacitado sin derecho al voto, por fallo final de un juzgado de sucesiones.

**1 Debe contestar estas preguntas antes de proseguir (Marque un recuadro)**

Nueva solicitud  Cambio de domicilio, nombre y/o otra información  Reemplazo de tarjeta

¿Es usted ciudadano de los Estados Unidos?  Sí  No      ¿Tendrá 18 años cumplidos antes o el día de la elección?  Sí  No

**Si marcó 'No' como respuesta a cualquiera de las preguntas anteriores no llene esta solicitud.**

¿Tiene interés en participar como trabajador electoral?  Sí  No

<b>2</b>	Apellido Incluir sufijo si lo hay (Jr, Sr, III)	Primer nombre	Segundo nombre (si aplica)	Nombre anterior (si aplica)
<b>3</b>	Domicilio residencial: Dirección y número de apartamento (si no se puede entregar el correo en su domicilio residencial).	Ciudad	TEXAS	
		Condado	Código postal	
<b>4</b>	Dirección postal: Dirección y número de apartamento (si no se puede entregar el correo en su domicilio residencial).	Ciudad	Estado	
			Código postal	

**5 Ciudad y condado de residencia anterior en Texas**

<b>6</b>	Fecha de nacimiento: (mm/dd/aaaa)	<b>7</b>	Sexo (Optativo)	<b>8</b>	Teléfono (Optativo) Incluya código de área
	<input type="text"/>		<input type="checkbox"/> Masculino <input type="checkbox"/> Femenino		( <input type="text"/> <input type="text"/> <input type="text"/> ) <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

<b>9</b>	Núm. de licencia de conducir de Texas o núm. de identificación personal de Texas (Expedido por el Departamento de Seguridad Pública).	Si no tiene licencia de conducir de Texas o núm. de identificación personal, proporcione los 4 últimos dígitos de su número de Seguro Social.
	<input type="text"/>	XXX-XX- <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

No tengo licencia de conducir de Texas/Número de Identidad Personal de Texas ni un número de Seguro Social.

**10 Entiendo que el dar información falsa para obtener una tarjeta de registro electoral constituye un delito de perjurio bajo las leyes estatales y federales. La condena por este delito puede resultar en encarcelamiento de hasta un año de cárcel, una multa de hasta \$4,000, o ambas cosas. Por favor lea cada una de las tres declaraciones antes de firmar.**

- Soy residente de este condado y ciudadano de los Estados Unidos;
- No he sido finalmente condenado por un delito grave, o si soy un delincuente, he purgado mi pena por completo, incluyendo cualquier plazo de encarcelamiento, libertad condicional, supervisión, período de libertad condicional, o he sido indultado; y
- No he sido determinado por un fallo final de un tribunal que ejerce la jurisdicción testamentaria que estoy totalmente incapacitado mentalmente o parcialmente incapacitado mentalmente sin derecho a voto.

**X**

Fecha: \_\_\_\_\_

Firma del solicitante o su agente (apoderado) y relación de éste con el solicitante, o nombre en letra de molde del solicitante si la firma es la de un testigo, y fecha.

**FOR VOLUNTEER DEPUTY REGISTRAR USE ONLY**

Deputy Number	Application must be delivered to Voter Registrar no later than <b>5 days</b> after receipt
Signature of Volunteer Deputy Registrar	Date

**RECEIPT (RECIBO DE REGISTRO)**

Name of Applicant/Applicant's Agent (if applicable) [Nombre del Solicitante/Agente del Solicitante (si aplica)]	Receipt No.: (No. de recibo:)
Name of Volunteer Deputy Registrar (Nombre del Registrador Adjunto Voluntario)	Deputy No.: (No. del suplente:)
Signature of Volunteer Deputy Registrar (Firma del Registrador Adjunto Voluntario)	Date: (Fecha:)

# **ATTACHMENT H**

**Application for a Ballot by Mail**

If someone helps you complete this form or mails, emails or faxes this form for you, that person must complete the Witness/Assistant Box 6 below. If you email or fax this form to the Early Voting Clerk, you must also send the original hardcopy to the Early Voting Clerk. If you are faxing or emailing this form on or near the deadline to apply for a Ballot by Mail, you must send the original hardcopy so that the Clerk receives it no later than the fourth business day after the day the Clerk received your email or fax. Original signatures are required on both the fax or email image and the physical hard copy. Electronic signatures are not permitted. THE HARDCOPY OF THIS APPLICATION MUST BE RECEIVED BY THE EARLY VOTING CLERK AND MEET ALL LEGALLY REQUIRED DEADLINES. Please read the instructions on the back of this form completely. If you have any questions, please call the Early Voting Clerk in your county of registration or the office of the Texas Secretary of State at 1-800-252-8683 or log on to www.sos.texas.gov for a list of County Early Voting Clerks and their email and physical addresses.

**1. Voter Information:** Please print all information clearly and legibly

**YOU MUST PROVIDE ONE of the following numbers**

Name: \_\_\_\_\_  
Last, First, Middle Suffix (Jr., Sr.)

Residence Address as shown on your Voter Registration Certificate

Address: \_\_\_\_\_  
Street Apt. # (if any) City State Zip Code

Optional Information: Providing this information is helpful to the Early Voting Clerk, but not required.

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ VUID #: \_\_\_\_\_ Pct #: \_\_\_\_\_

Email: \_\_\_\_\_ Tel. #: \_\_\_\_\_

Texas Driver's License, Texas Personal Identification Number or Election Identification Certificate Number issued by the Department of Public Safety (NOT your voter registration VUID#)

\_\_\_\_\_

If you do not have a Texas Driver's License, Texas Personal Identification Number or a Texas Election Identification Certificate Number, give the last 4 digits of your Social Security Number

XXX-XX-\_\_\_\_

I have not been issued a Texas Driver's License/Texas Personal Identification Number/Texas Election Identification Certificate or Social Security Number

**2. Mail my Ballot to:**

My Residence Address (as listed on my Voter Registration Certificate)

Other Address - You may use the Other Address line only if the other address fits one of the categories below.

Address \_\_\_\_\_ Apt. # (if any) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**My Other Address is: (Check one)**

The mailing address listed on my Voter Registration Certificate

Address Outside the County (voters absent from the county)

Hospital, Nursing Home, Long-Term Care Facility, Retirement or Assisted Living Center or a Relative \_\_\_\_\_ (Indicate Relationship)

Address of the Jail/Civil Commitment Facility or a Relative \_\_\_\_\_ (Indicate Relationship)

**3. Reason For Voting by Mail:**

65 Years of Age or Older

Disability (as defined in Texas Election Code 82.002(a), see instructions on reverse) By checking this box, "I affirm that I have a sickness or physical condition that prevents me from appearing at the polling place on Election Day without a likelihood of needing personal assistance or of injuring my health."

Expected to give birth within three weeks before or after Election Day \_\_\_\_\_

Expected Absence from the County (You may apply for a ballot for one election and its resulting runoff, if your dates of absence from the county include both elections)

Date you can begin to receive mail at your out of county address: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date of return to residence address: \_\_\_\_/\_\_\_\_/\_\_\_\_

Confined in Jail or Involuntary Civil Commitment (You may only apply for a ballot for one election and any resulting runoff)

**4. Send me a Ballot for the Following Elections:**

**Annual Application**  
 Send me a ballot for all Elections in this voting year (January – December) Annual Applications only available for voters 65 and older and voters with disabilities. You must select a party if you wish to vote in a primary. Select only one party's primary and its resulting runoff.

**Primary Election (even numbered years only)**

Democratic Primary  Any Resulting Runoff

Republican Primary  Any Resulting Runoff

Do Not Send me a Primary Ballot

**OR**

**Uniform Election Dates**

November Election  May Election (not a primary runoff)

Any Resulting Runoff  Other Special Election: \_\_\_\_\_ (Name or Date of Special Election, if known)

**Primary Election (even numbered years only)**

Democratic Primary  Any Resulting Runoff

Republican Primary  Any Resulting Runoff

(Voters who are absent from the county or confined in jail/civily committed may only apply for one election and its resulting runoff.)

**5. Sign Here:**

"I certify that the information given in this application is true, and I understand that giving false information in this application is a crime."

X \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

If applicant is unable to sign or make a mark (in the presence of a witness), the witness must complete the witness portion in Box 6 below. The signature or mark of the voter in the blank above must be an original signature made with a pen and ink. Electronic signatures are not permitted.

**6. If someone helps you complete this form or mails, emails or faxes the form for you, that person must complete the section below.**

**Instructions for Witnesses and Assistants:** See back of this form for the definitions of Witness and Assistant.

**Check one or both boxes below if you served as a Witness, an Assistant or both. All information below must be completed!**

If the applicant is unable to make a mark, you must check this box and complete all information below. Do not sign for the voter in Box 5.

Witness – If you are acting as a Witness to the applicant's signature or mark or signing on the applicant's behalf, you must state your relationship to the applicant here: \_\_\_\_\_ (Indicate Relationship)

Assistant – If you assisted the applicant in completing this application in the applicant's presence or mailed/emailed/faxed the application on behalf of the applicant.

**Failure to complete this section is a Class A Misdemeanor if applicant's signature was witnessed or applicant was assisted in completing this application.**

X \_\_\_\_\_

Signature of Witness/Assistant Printed Name of Witness/Assistant

\_\_\_\_\_

Street Address Apt. # (if any) City State Zip Code

AFFIX  
FIRST CLASS  
POSTAGE

FROM: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



# COLLIN COUNTY ELECTIONS 2010 REDBUD BLVD., STE 102 MCKINNEY, TX 75069

**BOX 1:** Name: Please give your full name as it was provided to the Voter Registrar and include any suffixes, middle initial, and last name.  
**BOX 2:** Address: Give your full residence address as shown on your Voter Registration Certificate. VUID and Precinct Number: If you know your VUID and/or Precinct number, you may provide it, but it is not a requirement.  
**BOX 3:** VUID and Precinct Number: If you know your VUID and/or Precinct number, you may provide it, but it is not a requirement.  
**BOX 4:** Home Number and Email Address: Providing your telephone number and email is not required but is extremely helpful to the Early Voting Clerk to clarify any information on this application.  
**BOX 5:** Required Personal Information: You MUST provide one of the following numbers: Texas Driver's License Number, Texas Personal Identification Number or Election Identification Certificate Number (NOT your VUID#). If you do not have one of the above mentioned numbers, you must provide the last 4 digits of your Social Security Number. If you have not been issued any of the required numbers, check the box that says that you have not been issued one of the required numbers. If you have been issued one of the required numbers, but it is not associated with your voter registration record, please contact your local registrar to inquire about how to add one of the required numbers to your voter registration record.  
**BOX 6:** Your ballot must be mailed to the address where you are registered to vote or the mailing address listed on your Voter Registration Certificate. There are some exceptions that allow you to have your ballot mailed to a different location.  
**BOX 7:** If you are voting by mail because you are 65 or have a disability – Your ballot can be mailed to a hospital, nursing home, long-term care facility, retirement or assisted living facility or a relative. If you are absent from the county or involuntarily committed – Your ballot can be mailed to the address of the jail/commitment facility or a close relative.  
**BOX 8:** The State of Texas requires that you provide a reason for voting by mail. Place a checkmark in the box that best describes your reason for voting by mail.  
**BOX 9:** If you choose 65 Years of Age or Older, you must turn 65 no later than Election Day.  
**BOX 10:** If you choose Disability, your disability must meet the definition of a disability as described in Section 82.002(a) of the Texas Election Code.  
**BOX 11:** If you choose Confinement for Childbirth, you expect to give birth within three weeks before or after Election Day.  
**BOX 12:** If you choose Expected Absence from the County, you must expect to be absent from the county on Election Day and during the hours of early voting by personal appearance or the remainder of the early voting period after you submit your application. The ballot must be mailed to an address outside the county and you must provide the dates that you will be absent from the county.  
**BOX 13:** If you choose Confined in Jail/Involuntary Civil Commitment under Chapter 841 of the Health and Safety Code, you must be legally eligible for Early Voting by Mail. At the time your early voting application is submitted, you are either (1) confined in jail serving a misdemeanor or sentence for a term that ends on or after Election Day, (2) pending trial after denial of bail, (3) without bail pending an appeal of a felony conviction, (4) pending trial or appeal on a bailable offense for which release on bail before Election Day is unlikely or (5) you are involuntarily civilly committed.  
**BOX 14:** Please select the election(s) for which you are applying.  
**Annual Application** – Only voters who are 65 or older or who have a disability are eligible to apply for an Annual ballot by mail. An Annual ballot by mail will provide you with a ballot for all the elections you are applying for.  
**Annual Application** – Only the applicant may submit his or her own application to the Early Voting Clerk.  
**By Mail** – The application may be submitted via the U.S. Postal Service.  
**Common or Contract Carrier** – The application may be submitted via a bona fide, for profit carrier.  
**Fax Transmission** – Please contact your Early Voting Clerk or the Secretary of State for fax numbers.  
**By email** – The application may be submitted via email. Please contact your Early Voting Clerk or the Secretary of State for email addresses.  
**IT WAS RECEIVED BY FAX OR EMAIL.**  
**IF YOU FAX OR EMAIL THE APPLICATION YOU MUST ALSO PHYSICALLY SEND THE ORIGINAL TO THE EARLY VOTING CLERK SO THAT IT IS RECEIVED NO LATER THAN THE FOURTH BUSINESS DAY AFTER**  
**OR 12:00 noon, whichever is later on the 11th day before Election Day.**  
**THE FAX OR EMAIL MUST REACH THE EARLY VOTING CLERK'S OFFICE NO LATER THAN THE CLOSE OF REGULAR BUSINESS**

**BOX 4 (CONTINUED)**  
 In a calendar year for which you are eligible, your Annual Application may be forwarded to either...  
 enthes holding elections in which you are eligible to vote. This means that you may receive a ballot for those other elections in addition to the ballot you requested with this application. If you do not select any elections in Box 4, your application will be considered an Annual Application if your reason for voting by mail was 65 Years of Age or Older or Disability.  
**BOX 5:** Sign and date your application. If you are unable to sign because of a physical disability or illiteracy, the application may be signed for you by a witness. The witness must be in the presence of the voter in order to act as a witness.  
**BOX 6:** Witness – The witness must place a checkmark in the Witness Box indicating you were unable to make your mark. The witness must state his or her relationship to you. If the witness is not a relative, the witness must state that on the line provided. The witness must sign and provide his or her printed name and residence address in each election or act as a witness for more than one Annual ballot by mail application in a calendar year.  
**Assistant** – If a person (other than a close relative or person registered to vote at the same address) assists you in completing this application, or mails, faxes, or emails this application on your behalf, the assistant must complete Box 6. The assistant must sign and provide his or her printed name and residence address. An assistant commits a Class A Misdemeanor if he or she provides assistance without providing the information required in Box 6.  
**DEADLINE TO APPLY:**  
**Your application must be received by the Early Voting Clerk not later than the 11th day before Election Day.** If the deadline falls on a weekend or holiday the deadline moves to the first preceding business day. An application may be submitted anytime in the calendar year but not later than the 11th day for the election in which you wish to vote. **Annual Applications** (disabilities), within 60 days of an election that takes place in the following calendar year, your Annual Application (only available for voters 65 and older and voters with disabilities), within 60 days of the election in the following calendar year. This 60 day rule applies only to Annual Applications and only when there is an election within 60 days of the date the Annual Application was received by the Early Voting Clerk in the preceding year.  
**SUBMITTING THE APPLICATION:**  
 The application must be submitted by one of the following methods:  
**In-Person** – Only the applicant may submit his or her own application to the Early Voting Clerk.  
**By Mail** – The application may be submitted via the U.S. Postal Service.  
**Common or Contract Carrier** – The application may be submitted via a bona fide, for profit carrier.  
**Fax Transmission** – Please contact your Early Voting Clerk or the Secretary of State for fax numbers.  
**By email** – The application may be submitted via email. Please contact your Early Voting Clerk or the Secretary of State for email addresses.  
**IT WAS RECEIVED BY FAX OR EMAIL.**  
**IF YOU FAX OR EMAIL THE APPLICATION YOU MUST ALSO PHYSICALLY SEND THE ORIGINAL TO THE EARLY VOTING CLERK SO THAT IT IS RECEIVED NO LATER THAN THE FOURTH BUSINESS DAY AFTER**  
**OR 12:00 noon, whichever is later on the 11th day before Election Day.**  
**THE FAX OR EMAIL MUST REACH THE EARLY VOTING CLERK'S OFFICE NO LATER THAN THE CLOSE OF REGULAR BUSINESS**

# **ATTACHMENT I**

**Solicitud de Boleta Postal**

Si alguien le ayuda a completar esta solicitud o enviarla por correo, vía correo electrónico, o vía fax por usted, esta persona debe completar la sección 6 bajo Testigo/Asistente. Si envía esta solicitud por correo electrónico o vía fax al Secretario(a) de Votación Adelantada, debe de enviar también la solicitud original al Secretario(a) de Votación Adelantada. Si está enviando esta solicitud vía fax o vía correo electrónico cerca de la fecha límite de enviar la Solicitud de Boleta Postal, debe de enviar el documento original de manera que el Secretario(a) lo reciba no más de cuatro días laborables después del día que el Secretario(a) reciba su correo electrónico o fax. Las firmas originales son requeridas en ambos en el fax o en la imagen incluida en el correo electrónico y en la copia física del original. Firmas electrónicas no son permitidas. EL DOCUMENTO ORIGINAL DE ESTA SOLICITUD DEBE SER RECIBIDO POR EL SECRETARIO DE VOTACIÓN ADELANTADA Y DEBE CUMPLIR TODOS LOS PLAZOS DE REQUISITOS LEGALES. Por favor lea todas las instrucciones que están en la parte de atrás de esta forma. Si tiene preguntas, por favor llame al Secretario(a) de Votación Adelantada del condado donde está registrado o a la oficina de la Secretaria de Estado al 1-800-252-8683 o visite www.sos.texas.gov para la lista de Secretarios de Votación Adelantada de los Condados y sus correos electrónicos y direcciones físicas.

**1. Información del Votante:** Por favor, escriba toda la información clara y legible.

**Debe proporcionar uno de los siguientes números.**

Nombre: \_\_\_\_\_  
 Apellido Primer Nombre Segundo Nombre Sufijo (Jr., Sr.)

**Domicilio Residencial como aparece en su Certificado de Registro Electoral**

Dirección: \_\_\_\_\_  
 Calle Apt. # (si aplica) Ciudad Estado Código Postal

**Información Opcional: Proporcionar esta información es útil para el Secretario de Votación Adelantada, pero no es requerida.**

Fecha de Nacimiento: \_\_\_\_/\_\_\_\_/\_\_\_\_ VUID #: \_\_\_\_\_ Pct #: \_\_\_\_\_

Correo Electrónico: \_\_\_\_\_ Teléfono: \_\_\_\_\_

Licencia de Conducir de Texas, Número de Identificación Personal de Texas o Número de Certificado de Identificación Electoral emitido por el Departamento de Seguridad Pública (NO su número de registro de votante VUID#)

Si no tiene una Licencia de Conducir de Texas, Número de Identificación Personal de Texas o Número de Certificado de Identificación Electoral de Texas, proporcione los últimos 4 dígitos de su Número de Seguro Social.

XXX - XX - \_\_\_\_ - \_\_\_\_

No se me ha emitido una Licencia de Conducir de Texas/ Número de Identificación Personal de Texas/Número de Certificado de Identificación Electoral de Texas o Número de Seguro Social.

**2. Envíe mi boleta por correo a:**

Mi Domicilio Residencial (como esta listado en mi Certificado de Registro Electoral)

Otra Dirección: Solo use la línea para la Otra Dirección si la otra dirección reúne una de las categorías abajo.

Dirección Apt# (si aplica) Ciudad Estado Código Postal

**Mi otra dirección es (marque uno)**

La dirección listada en mi Certificado de Registro Electoral

Dirección fuera del condado (votantes ausente del condado)

Hospital, asilo de ancianos, centro de cuidado de largo plazo, centro de jubilación o centro de vida asistida, o de un familiar \_\_\_\_\_ (indicar la relación)

Dirección de la cárcel/lugar civil de rehabilitación o de un familiar \_\_\_\_\_ (indicar la relación)

**3. Motivo para votar por correo:**

65 o más años de edad

Discapacidad (como está definido en el Código Electoral de Texas 82.002(a), ver instrucciones en el reverso) Al marcar este cuadro, "Yo afirmo que tengo una enfermedad o condición física que me impide aparecer en el lugar de votación en el día de las elecciones sin la posibilidad de necesitar asistencia o de afectar mi salud."

Estaré por dar a luz dentro de las tres semanas antes o después del día de las elecciones.

Estaré ausente del condado (Usted solo puede solicitar una boleta por correo para una elección, y cualquier elección de desempate resultante, si su periodo de tiempo ausente del condado incluye ambas elecciones).

Fecha en la que puede empezar a recibir correspondencia en su dirección fuera del condado: \_\_\_\_/\_\_\_\_/\_\_\_\_ Fecha de regreso a su residencia: \_\_\_\_/\_\_\_\_/\_\_\_\_

Confinado en cárcel o compromiso civil involuntario (Usted solo puede solicitar una boleta por correo para una elección, y cualquier elección de desempate resultante)

**4. Envíeme una boleta para las siguientes elecciones:**

**Aplicación Anual**  
 Envíeme una boleta para cada elección del año electoral (Enero – Diciembre). Aplicaciones anuales son disponibles solo para los votantes de 65 años o más y votantes discapacitado(a)s. Deberá seleccionar un partido si desea votar en una elección primaria. Seleccione solo una primaria y su desempate resultante.

**Elección Primaria (solo años pares)**

Primaria Democrática  Desempate resultante

Primaria Republicana  Desempate resultante

No Enviarme una Boleta para Primaria

**Fechas de Elecciones Uniformes**

Elección de noviembre  Elección de mayo (que no sea desempate resultante de primaria)

Desempate resultante  Otra elección especial: \_\_\_\_\_ (nombre y fecha de la elección especial, si sabe)

**Elección Primaria (solo años pares)**

Primaria Democrática  Desempate resultante

Primaria Republicana  Desempate resultante

(Votantes ausentes del condado o confinados en cárcel/compromiso civil solo pueden solicitar para una elección y su desempate resultante)

**5. Firme aquí:**

"Yo certifico que la información brindada en esta aplicación es cierta, y entiendo que proveer información falsa en esta aplicación es un crimen."

X \_\_\_\_\_ Fecha: \_\_\_\_/\_\_\_\_/\_\_\_\_

Si el solicitante no puede firmar o hacer una marca (frente a un testigo), el testigo debe completar la parte del testigo en la sección 6 abajo. La firma o la marca del votante en el espacio arriba debe ser original, hecha con una pluma y tinta. Firmas electrónicas no son permitidas.

**6. Si alguien le ayuda a completar esta forma o si la envía por correo, correo electrónico o fax, esa persona debe completar esta sección abajo.**

**Instrucciones para Testigos y Asistentes:** Ver el reverso de esta forma para las definiciones de Testigo y Asistente. Marque uno o ambos cuadros abajo si sirvió como Testigo, Asistente o ambos. Toda la información debe ser completada!

Si el solicitante no puede marcar, usted debe marcar este cuadro y completar la información abajo. No firme por el votante en la sección 5.

Testigo – Si está sirviendo como testigo a la firma o marca del solicitante o firmando por el solicitante, debe indicar su relación con el solicitante aquí: \_\_\_\_\_ (indique relación)

Asistente – Si usted asistió al solicitante a completar esta solicitud en presencia del solicitante o envió por correo/correo electrónico/fax la solicitud por el solicitante.

Si no completa esta sección, es un delito menor Clase A si la firma del solicitante se atestiguó o si el solicitante recibió ayuda para completar esta solicitud.

X \_\_\_\_\_

Firma del Testigo/Asistente Nombre del Testigo/Asistente en letra de molde

Dirección Residencial Apt. # (si aplica) Ciudad Estado Código Postal



Instrucciones para la Solicitud de Boleta Postal

Sección 1:

- **Nombre:** Por favor escriba su nombre completo como se le suministró al Registrador de Votantes e incluya cualquier sufijo como Jr., Sr., o III.
- **Fecha de Nacimiento:** No es requerida pero es útil para determinar la identidad cuando hay votantes con nombres similares.
- **Dirección:** De su dirección completa como aparece en su Certificado de Registro Electoral.
- **VUID y Número del Precinto:** Si sabe su VUID y/o número del precinto, puede proporcionarlo, pero no es requisito.
- **Número Telefónico y Correo Electrónico:** Proporcionar su número telefónico y dirección de correo electrónico no es requerido pero es extremadamente útil al Secretario(a) de Votación Adelantada para clarificar cualquier información en esta solicitud.
- **Información Personal Requerida: DEBE proporcionar uno de los siguientes números:** Número de Licencia de Conducir de Texas, Número de Identificación Personal de Texas o Número de Certificado de Identificación Electoral (NO su número de VUID). Si no tiene uno de los números mencionados anteriormente, debe proporcionar los últimos 4 dígitos de su Número de Seguro Social. Si no se le ha expedido ninguno de los números requeridos, marque la casilla que dice que no se le ha emitido uno de los números requeridos. Si se le ha expedido uno de los números requeridos, pero no está asociado con su registro de votantes, por favor comuníquese con su registrador local para averiguar sobre cómo agregar uno de los números requeridos a su registro de votantes.

Sección 2:

- Su boleta debe ser enviada por correo a la dirección donde está registrado(a) para votar o la dirección postal indicada en su Certificado de Registro Electoral. **Hay algunas excepciones que le permitirá que su boleta sea enviada a un lugar distinto.**
- **Si está votando por correo porque tiene 65 años o tiene alguna discapacidad** - Su boleta puede ser enviada a un hospital, asilo de ancianos, centro de cuidado de largo plazo, centro de jubilación, centro de vida asistida o a un familiar.
  - **Si está ausente de su condado** - Su boleta debe ser enviada a una dirección fuera del condado.
  - **Si está confinado en la cárcel o involuntariamente comprometido civilmente** - Su boleta puede ser enviada a la dirección de la cárcel/lugar de rehabilitación civil o a un familiar cercano.

Sección 3:

- El Estado de Texas requiere que usted provea una razón para votar por correo. Marque el cuadro que mejor describe su razón para votar por correo.
- Si usted escoge **65 o más años de edad**, usted debe cumplir 65 no más tarde que el Día de las Elecciones.
  - Si usted escoge **Discapacidad**, su discapacidad debe cumplir con la definición de discapacidad como esta descrita en la Sección 82.002(a) del Código Electoral de Texas.
  - Si usted escoge **Confinamiento por Parto**, usted espera dar a luz dentro de las 3 semanas antes o después del Día de las Elecciones.
  - Si usted escoge **Ausencia Esperada del Condado**, usted deberá estar ausente del condado en el Día de las Elecciones y durante las horas de votación adelantada por presencia personal o por el periodo restante de votación adelantada después que envió su solicitud. La boleta debe enviarse a una dirección fuera del condado y usted debe proveer las fechas en que estará ausente del condado.
  - Si usted escogió **Confinado en la Cárcel/Involuntariamente Comprometido Civilmente** bajo el **Capítulo 841 del Código de Salud y Seguridad**, usted debe ser elegible legalmente para la votación adelantada por correo. Al momento que su solicitud para votar por adelantado es enviada, usted es o esta (1) confinado en la cárcel cumpliendo una sentencia de un delito menor por un periodo que finaliza en el Día de las Elecciones o después; (2) con juicio pendiente después de la negación de fianza; (3) sin fianza, pendiente de una apelación de una convicción por delito de felonía; (4) con juicio pendiente o apelación de un delito susceptible de fianza por el cual la libertad bajo fianza antes del Día de Elecciones es muy improbable o (5) usted está involuntariamente comprometido civilmente.

Sección 4:

Por favor escoja la elección(es) por las cuales está aplicando.

**Aplicación Anual:** Solo votantes que tienen 65 o más años de edad o que tienen una discapacidad son elegibles para aplicar para la Boleta Anual por correo. Una Boleta Anual por correo le permitirá recibir una boleta para cada elección en el año calendario en las que usted sea elegible para votar. Su solicitud anual puede ser

Sección 4: (Continúa)

remitada a otras entidades que celebran elecciones en las que usted puede votar. Esto significa que usted puede recibir una boleta para otras elecciones además de la boleta que solicitó con esta solicitud. Si no escoge ninguna opción de la Sección 4, su solicitud será considerada una Aplicación Anual si el motivo de votar por correo fue 65 o más años de edad o Discapacidad.

Sección 5:

Firme y ponga la fecha de su solicitud. Si usted no puede firmar debido a una discapacidad física o por analfabetismo, la solicitud debe ser firmada por el testigo de parte de usted. El testigo debe estar en presencia del votante para actuar como su testigo.

Sección 6:

- **Testigo** - El testigo **debe** marcar en la Sección de Testigo indicando que usted no pudo hacer una marca. El testigo **debe** proveer el parentesco que tiene con usted. Si el testigo no es un familiar, el testigo **debe** proveer eso en la línea provista. El testigo **debe** firmar y dar su nombre y dirección residencial en letra de molde. Es un delito menor de Clase B el que una persona atestigüe en más de una solicitud de boleta postal para cada elección o para más de una Aplicación Anual en un año calendario.
- **Asistente** - Si una persona (aparte de ser familiar cercano o persona inscrita para votar con la misma dirección del votante) le ayuda a completar esta solicitud o se la envía por correo, por fax o por correo electrónico, el asistente **debe** completar la sección 6. El asistente **debe** firmar y dar su nombre y dirección residencial en letra de molde. El asistente comete un delito menor de Clase A si él o ella provee su asistencia sin completar la información requerida en Sección 6.

Fecha Límite para Aplicar:

Su solicitud debe ser recibida por el Secretario(a) de Votación Adelantada no más tarde que el Día 11 antes del Día de las Elecciones. Si la fecha límite es un fin de semana o día feriado, la fecha límite se traslada al primer día hábil anterior. Una solicitud puede ser enviada en cualquier momento durante el año electoral pero no más tarde que el día 11 antes de las Elecciones en que desea votar.

**Aplicaciones Anuales** - Si usted envía su Aplicación Anual (solo disponible para votantes de 65 o más años de edad y votantes con discapacidad), dentro de los 60 días antes de la elección que se llevará a cabo en el siguiente año calendario, su solicitud será válida para el resto de las elecciones en el siguiente año calendario. La regla de los 60 días aplica solo a Aplicaciones Anuales y solo cuando hay una elección dentro de los 60 días después de haber sido recibida por el Secretario(a) de Votación Adelantada en el año anterior.

Enviar su Solicitud:

- Esta solicitud debe ser enviada por uno de los siguientes métodos:
- **En persona** - Solo el/la votante puede someter su propia solicitud al Secretario(a) de Votación Adelantada
  - **Por correo** - La solicitud puede ser enviada por medio del Servicio Postal de los EE. UU.
  - **Por transportista común o contratado** - La solicitud puede ser enviada a través de un transportista común o contratado, que es de buena fe, con fines de lucro.
  - **Por fax** - Por favor contacte a su Secretario(a) de Votación Adelantada o a la Secretaria del Estado para los números de fax.
  - **Por correo electrónico** - La solicitud puede ser enviada por correo electrónico. Por favor contacte a su Secretario(a) de Votación Adelantada o a la Secretaria de Estado para las direcciones de correos electrónicos.

El fax o correo electrónico debe llegar a la oficina del Secretario(a) de Votación Adelantada no más tarde que el cierre de horario regular de oficina o a las 12:00 del mediodía, el que sea más tarde en el Día 11 antes del Día de las Elecciones.

SI USTED ENVÍA SU SOLICITUD VÍA FAX O CORREO ELECTRÓNICO, USTED TAMBIÉN DEBE DE ENVIAR EL DOCUMENTO ORIGINAL AL SECRETARIO(A) DE VOTACIÓN ADELANTADA DE TAL MANERA QUE SERÁ RECIBIDO A MÁS TARDAR EL CUARTO DÍA DESPUÉS QUE HAYA SIDO RECIBIDO POR FAX O POR CORREO.

FROM: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

AFFIX  
FIRST CLASS  
POSTAGE



TO: EARLY VOTING CLERK  
 2010 REDBUD BLVD., STE. 102  
 MCKINNEY, TX 75063

# **ATTACHMENT J**

**APPLICATION FOR A BALLOT BY MAIL**

VUID #: \_\_\_\_\_ Pct #: \_\_\_\_\_ - \_\_\_\_\_

If someone helps you complete this form or mails, emails or faxes this form for you, that person must complete the Witness/Assistant Box 6 below. If you email or fax this form to the Early Voting Clerk, you must also send the original hardcopy to the Early Voting Clerk. If you are faxing or emailing this form on or near the deadline to apply for a Ballot by Mail, you must send the original hardcopy so that the Clerk receives it no later than the fourth business day after the day the Clerk received your email or fax. **Original signatures are required on both the fax or email image and the physical hard copy.** Electronic signatures are not permitted. **THE HARDCOPY OF THIS APPLICATION MUST BE RECEIVED BY THE EARLY VOTING CLERK AND MEET ALL LEGALLY REQUIRED DEADLINES.** Please read the instructions on the back of this form completely. If you have any questions, please call the Early Voting Clerk in your county of registration or the office of the Texas Secretary of State at 1-800-252-8683 or log on to [www.sos.texas.gov](http://www.sos.texas.gov) for a list of County Early Voting Clerks and their email and physical addresses.

**1. Voter Information: Please PRINT all information clearly and legibly**

YOU MUST PROVIDE ONE of the following numbers

Name: \_\_\_\_\_  
Last First Middle Suffix (Jr., Sr.)  
 Residence address shown on your Voter Registration Certificate  
 Address: \_\_\_\_\_  
Street Apt. # (if any) City State Zip Code  
 Providing this information is helpful to the Early Voting Clerk, but not required - Optional Information Section:  
 Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_-\_\_\_\_  
 Email: \_\_\_\_\_

**Texas Driver's License, Texas Personal ID Number**  
 or Election Identification Certificate Number issued by the  
 Dept. of Public Safety (NOT your voter registration VUID#)

**If you do not have a Texas Driver's License, TX Personal ID**  
 # or Election ID Certificate #, give the last 4 digits of your  
 Social Security Number:

I have not been issued a Texas Driver's License / TX Personal ID # / Election Identification Certificate or Social Security Number

**2. Mail my Ballot to:**

- My Residence Address (as listed on my Voter Registration Certificate)  
 Other Address - You may use the Other Address line only if the other address fits one of the categories below.

\_\_\_\_\_ Address Apt. # (if any) City State Zip Code

**My Other Address is: (Check one)**

- The mailing address listed on my Voter Registration Certificate  
 Address Outside the County (voters absent from the county)  
 Hospital, Nursing Home, Long-Term Care Facility, Retirement or Assisted Living Center or a Relative: \_\_\_\_\_ (Indicate Relationship)  
 Address of the Jail/Civil Commitment Facility or a Relative: \_\_\_\_\_ (Indicate Relationship)

**3. Reason For Voting by Mail:**

- 65 Years of Age or Older  
 Disability (as defined in Texas Election Code 82.002(a), see instruction on reverse) By checking this box:  
 "I affirm that I have a sickness or physical condition that prevents me from appearing at the polling place on election day without a likelihood of needing personal assistance or of injuring my health."  
 Expected to give birth within three weeks before or after Election Day  
 Expected Absence from the County (You may apply for a ballot for one election and its resulting runoff, if your dates of absence include both elections)  
 Date you can begin to receive mail at your out of county address: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date of return to residence address: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Confined in Jail or Involuntary Civil Commitment (You may only apply for a ballot for one election and any resulting runoff)

**4. Send me a Ballot for the Following Elections:**

<input type="checkbox"/> <b>Annual Application</b> Send me a ballot for all Elections in this voting year (JAN – DEC). Annual Applications only available for voters 65 and older and voters with disabilities. You must select a party if you wish to vote in a primary. Select only one party's primary and its resulting runoff. <b>Primary Election (even numbered years only)</b> <input type="checkbox"/> Democrat Primary <input type="checkbox"/> Any Resulting Runoff <input type="checkbox"/> Republican Primary <input type="checkbox"/> Any Resulting Runoff <input type="checkbox"/> Do Not Send me a Primary Ballot	OR	<b>Uniform Election Dates</b> <input type="checkbox"/> November Election <input type="checkbox"/> May Election (not a primary runoff) <input type="checkbox"/> Any Resulting Runoff <input type="checkbox"/> Other Special Election: (Name & Date) _____ <b>Primary Election (even numbered years only)</b> <input type="checkbox"/> Democrat Primary <input type="checkbox"/> Any Resulting Runoff <input type="checkbox"/> Republican Primary <input type="checkbox"/> Any Resulting Runoff <i>(Voters who are absent from the county or confined in jail/civilly committed may only apply for one election and its resulting runoff.)</i>
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FOLD ON DOTTED LINE

**5. Sign Here:**

**"I certify that the information given in this application is true, and I understand that giving false information in this application is a crime."**

X \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

If applicant is unable to sign or make a mark (in the presence of a witness), the witness must complete the witness portion in Box 6 below. The signature or mark of the voter in the blank above must be an original signature made with a pen and ink. Electronic signatures or Power of Attorney signatures are not permitted.

**6. If someone helps you complete this form or mails, emails or faxes the form for you, that person must complete the section below.**

**Instructions for Witnesses and Assistants: See back of this form for the definitions of Witness and Assistant.**

**Check one or both boxes below if you served as a Witness, an Assistant or both. All information below MUST BE completed!**

- If the applicant is unable to make a mark, you must check this box and complete all information below. Do not sign for the voter in Box 5.  
 **Witness** – If you are acting as a Witness to the applicant's signature or mark; or you are signing below on the applicant's behalf - you must state your relationship to the applicant here: \_\_\_\_\_ (Indicate Relationship)  
 **Assistant** – If you assisted the applicant in completing this application in the applicant's presence or mailed/emailed/faxed the application on behalf of the applicant.

**Failure to complete this section is a Class A Misdemeanor, if applicant's signature was witnessed or applicant was assisted in completing this application.**

X \_\_\_\_\_  
 Signature of Witness/Assistant Printed Name of Witness/Assistant

\_\_\_\_\_ Street Address Apt. # (if any) City State Zip Code

COLLIN COUNTY ELECTIONS  
 TO: EARLY VOTING CLERK  
 2010 REDBUD BLVD., STE. 102  
 MCKINNEY, TX 75069



POSTAGE  
 FIRST CLASS  
 AFFIX

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ TO

FOLD ON DOTTED LINE AND TAPE CLOSED

Instructions for Application for Ballot by Mail

**BOX 1:**

- **Name:** Please give your full name as it was provided to the Voter Registrar and include any suffixes like Jr., Sr., or III.
- **Date of Birth:** Not a requirement but it is helpful to determine identity when voters have common names.
- **Address:** Give your full residence address as shown on your Voter Registration.
- **VUID and Precinct Number:** If you know your VUID and/or Precinct number, you may provide it, but it is not a requirement.
- **Phone Number and Email Address:** Providing your telephone number and email is not required but is extremely helpful to the Early Voting Clerk to clarify any information on this application.
- **Required Personal Information:** You MUST provide one of the following numbers: Texas Driver's License #, Texas Personal IID # or Election ID Certificate # (NOT your VUID#). If you do not have one of the above mentioned numbers, you must provide the last 4 digits of your Social Security Number. If you have not been issued any of the required numbers, check the box that says that you have not been issued one of the required numbers. If you have been issued one of the required numbers, but it is not associated with your voter registration record, please contact your local registrar to inquire about how to add one of the required numbers to your voter registration record.

**BOX 2:**

Your ballot must be mailed to the address where you are registered to vote or the mailing address listed on your Voter Registration Certificate.

**Some exceptions that allow you to have your ballot mailed to a different location:**

- **If you are voting by mail because you are 65 or have a disability** – Your ballot can be mailed to a hospital, nursing home, long-term care facility, retirement or assisted living facility or a relative.
- **If you are absent from the county** – Your ballot must be mailed to an address outside the county.
- **If you are confined in jail or involuntarily civilly committed** – Your ballot can be mailed to the address of the jail/commitment facility or a close relative.

**BOX 3:**

The State of Texas requires that you provide a reason for voting by mail. Place a checkmark in the box that best describes your reason for voting by mail.

- If you choose **65 Years of Age or Older**, you must turn 65 no later than Election Day.
- If you choose **Disability**, your disability must meet the definition of a disability as described in Section 82.002(a) of the Texas Election Code.
- If you choose **Confinement for Childbirth**, you expect to give birth within three weeks before or after Election Day.
- If you choose **Expected Absence from the County**, you must expect to be absent from the county on Election Day and during the hours of early voting by personal appearance or the remainder of the early voting period after you submit your application. The ballot must be mailed to an address outside the county and you must provide the dates that you will be absent from the county.
- If you choose **Confined in Jail/Involuntary Civil Commitment under Chapter 841 of the Health and Safety Code**, you must be legally eligible for Early Voting by Mail. At the time your early voting ballot application is submitted, you are either (1) confined in jail serving a misdemeanor sentence for a term that ends on or after Election Day; (2) pending trial after denial of bail; (3) without bail pending an appeal of a felony conviction; (4) pending trial or appeal on a bailable offense for which release on bail before Election Day is unlikely or (5) you are involuntarily civilly committed.

**SUBMITTING THE APPLICATION:**

The application must be submitted by one of the following methods:

- **In-Person** – Only the applicant may submit his or her own application to the Early Voting Clerk.
- **By Mail** – The application may be submitted via the U.S. Postal Service.
- **Common or Contract Carrier** – The application may be submitted via a bona fide, for-profit carrier.
- **Fax Transmission** – Please contact your Early Voting Clerk or the Secretary of State for fax numbers.
- **By Email** – The application may be submitted via email. Please contact your Early Voting Clerk or the Secretary of State for email addresses.

The fax or email must reach the Early Voting Clerk's office no later than the close of regular business or 12:00 noon, whichever is later on the 11th day before Election Day.

**IF YOU FAX OR EMAIL THE APPLICATION YOU MUST ALSO PHYSICALLY SEND THE ORIGINAL TO THE EARLY VOTING CLERK SO THAT IT IS RECEIVED NO LATER THAN THE FOURTH BUSINESS DAY AFTER IT WAS RECEIVED BY FAX OR EMAIL.**

**BOX 4:**

Please select the election(s) for which you are applying.

**Annual Application** – Only voters who are 65 or older or who have a disability are eligible to apply for an Annual ballot by mail. An Annual ballot by mail will provide you with a ballot for all the elections in a calendar year for which you are eligible. Your Annual Application may be forwarded to other entities holding elections in which you are eligible to vote. This means that you may receive a ballot for those other elections in addition to the ballot you requested with this application. If you do not select any elections in Box 4, your application will be considered an Annual Application if your reason for voting by mail was 65 Years of Age or Older or Disability.

**BOX 5:**

Sign and date your application. If you are unable to sign because of a physical disability or illiteracy, the application may be signed for you by a witness. The witness must be in the presence of the voter in order to act as a witness.

**BOX 6:**

- **Witness** – The witness must place a checkmark in the Witness Box indicating you were unable to make your mark. The witness must state his or her relationship to you. If the witness is not a relative, the witness must state that on the line provided. The witness must sign and provide his or her printed name and residence address. It is a Class B Misdemeanor to act as a witness for more than one application in each election or act as a witness for more than one annual ballot by mail application in a calendar year.
- **Assistant** – If a person (other than a close relative or person registered to vote at the same address) assists you in completing this application; or mails, faxes or emails this application on your behalf, the assistant must complete Box 6. The assistant must sign and provide his or her printed name and residence address. An assistant commits a Class A Misdemeanor if he or she provides assistance without providing the information required in Box 6.

**DEADLINE TO APPLY:**

**Your application must be received by the Early Voting Clerk** not later than the 11th day before Election Day. If the deadline falls on a weekend or holiday the deadline moves to the first preceding business day. An application may be submitted anytime in the calendar year but not later than the 11th day for the election in which you wish to vote.

**Annual Applications** - If you submit an Annual Application (only available for voters 65 and older and voters with disabilities), within 60 days of an election that takes place in the following calendar year, your application will be valid for all elections in the following calendar year. This 60 day rule applies only to Annual Applications and only when there is an election within 60 days of the date the Annual Application was received by the Early Voting Clerk in the preceding year.

**ELECTION OFFICE CONTACT INFO:**

**Collin County Elections  
 Early Voting Clerk**

**Physical Address:**  
 2010 Redbud Blvd., Ste. 102, McKinney, TX 75069

**Mailing Address:**  
 2010 Redbud Blvd., Ste. 102, McKinney, TX 75069

**Office:** (972) 547-1900 **Fax:** (972) 547-1914

**Email:** [Election@collincountytx.gov](mailto:Election@collincountytx.gov)  
**Website:** [www.collincountytx.gov/elections](http://www.collincountytx.gov/elections)

# **ATTACHMENT K**



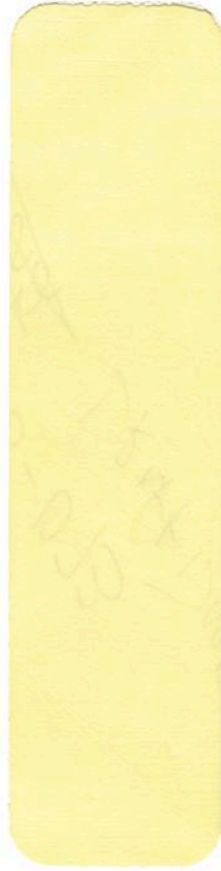
Collin County Elections  
Elections Administrator  
2010 Redbud Blvd., Suite 102  
McKinney, Texas 75069



# **ATTACHMENT L**



Collin County Elections  
Elections Administrator  
2010 Redbud Blvd., Suite 102  
McKinney, Texas 75069





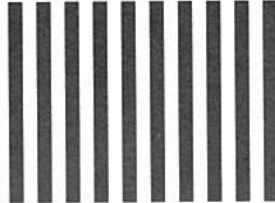
# **ATTACHMENT M**



Collin County Elections  
Elections Administrator  
2010 Redbud Blvd., Suite 102  
McKinney, Texas 75069



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES



**BUSINESS REPLY MAIL**  
FIRST-CLASS MAIL PERMIT NO. 3643 MCKINNEY TX

POSTAGE WILL BE PAID BY ADDRESSEE

**ELECTIONS ADMINISTRATOR**  
2010 REDBUD BLVD STE 102  
MCKINNEY TX 75069-9929



# CONFLICT OF INTEREST QUESTIONNAIRE

For vendor doing business with local governmental entity

## FORM CIQ

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.

This questionnaire is being filed in accordance with Chapter 176, Local Government Code, by a vendor who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the vendor meets requirements under Section 176.006(a).

By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the vendor becomes aware of facts that require the statement to be filed. See Section 176.006(a-1), Local Government Code.

A vendor commits an offense if the vendor knowingly violates Section 176.006, Local Government Code. An offense under this section is a misdemeanor.

### OFFICE USE ONLY

Date Received

**1** Name of vendor who has a business relationship with local governmental entity.

**2**  Check this box if you are filing an update to a previously filed questionnaire. (The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date on which you became aware that the originally filed questionnaire was incomplete or inaccurate.)

**3** Name of local government officer about whom the information is being disclosed.

\_\_\_\_\_  
Name of Officer

**4** Describe each employment or other business relationship with the local government officer, or a family member of the officer, as described by Section 176.003(a)(2)(A). Also describe any family relationship with the local government officer. Complete subparts A and B for each employment or business relationship described. Attach additional pages to this Form CIQ as necessary.

A. Is the local government officer or a family member of the officer receiving or likely to receive taxable income, other than investment income, from the vendor?

Yes       No

B. Is the vendor receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer or a family member of the officer AND the taxable income is not received from the local governmental entity?

Yes       No

**5** Describe each employment or business relationship that the vendor named in Section 1 maintains with a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership interest of one percent or more.

**6**  Check this box if the vendor has given the local government officer or a family member of the officer one or more gifts as described in Section 176.003(a)(2)(B), excluding gifts described in Section 176.003(a-1).

**7**

\_\_\_\_\_  
Signature of vendor doing business with the governmental entity

\_\_\_\_\_  
Date

## **CONFLICT OF INTEREST QUESTIONNAIRE**

### **For vendor doing business with local governmental entity**

A complete copy of Chapter 176 of the Local Government Code may be found at <http://www.statutes.legis.state.tx.us/Docs/LG/htm/LG.176.htm>. For easy reference, below are some of the sections cited on this form.

**Local Government Code § 176.001(1-a):** "Business relationship" means a connection between two or more parties based on commercial activity of one of the parties. The term does not include a connection based on:

- (A) a transaction that is subject to rate or fee regulation by a federal, state, or local governmental entity or an agency of a federal, state, or local governmental entity;
- (B) a transaction conducted at a price and subject to terms available to the public; or
- (C) a purchase or lease of goods or services from a person that is chartered by a state or federal agency and that is subject to regular examination by, and reporting to, that agency.

**Local Government Code § 176.003(a)(2)(A) and (B):**

(a) A local government officer shall file a conflicts disclosure statement with respect to a vendor if:

\*\*\*

(2) the vendor:

(A) has an employment or other business relationship with the local government officer or a family member of the officer that results in the officer or family member receiving taxable income, other than investment income, that exceeds \$2,500 during the 12-month period preceding the date that the officer becomes aware that

- (i) a contract between the local governmental entity and vendor has been executed;
- or
- (ii) the local governmental entity is considering entering into a contract with the vendor;

(B) has given to the local government officer or a family member of the officer one or more gifts that have an aggregate value of more than \$100 in the 12-month period preceding the date the officer becomes aware that:

- (i) a contract between the local governmental entity and vendor has been executed; or
- (ii) the local governmental entity is considering entering into a contract with the vendor.

**Local Government Code § 176.006(a) and (a-1)**

(a) A vendor shall file a completed conflict of interest questionnaire if the vendor has a business relationship with a local governmental entity and:

- (1) has an employment or other business relationship with a local government officer of that local governmental entity, or a family member of the officer, described by Section 176.003(a)(2)(A);
- (2) has given a local government officer of that local governmental entity, or a family member of the officer, one or more gifts with the aggregate value specified by Section 176.003(a)(2)(B), excluding any gift described by Section 176.003(a-1); or
- (3) has a family relationship with a local government officer of that local governmental entity.

(a-1) The completed conflict of interest questionnaire must be filed with the appropriate records administrator not later than the seventh business day after the later of:

(1) the date that the vendor:

- (A) begins discussions or negotiations to enter into a contract with the local governmental entity; or
- (B) submits to the local governmental entity an application, response to a request for proposals or bids, correspondence, or another writing related to a potential contract with the local governmental entity; or

(2) the date the vendor becomes aware:

- (A) of an employment or other business relationship with a local government officer, or a family member of the officer, described by Subsection (a);
- (B) that the vendor has given one or more gifts described by Subsection (a); or
- (C) of a family relationship with a local government officer.

## **INFORMATION REGARDING CONFLICT OF INTEREST QUESTIONNAIRE**

During the 79<sup>th</sup> Legislative Session, House Bill 914 was signed into law effective September 1, 2015, which added Chapter 176 to the Texas Local Government Code. Recent changes have been made to Chapter 176 pursuant to HB23, which passed the 84<sup>th</sup> Legislative Session. Chapter 176 mandates the public disclosure of certain information concerning persons doing business or seeking to do business with Collin County, including family, business, and financial relationships such persons may have with Collin County officers or employees involved in the planning, recommending, selecting and contracting of a vendor for this procurement.

For a copy of Form CIQ and CIS:

[http://www.ethics.state.tx.us/filinginfo/conflict\\_forms.htm](http://www.ethics.state.tx.us/filinginfo/conflict_forms.htm)

The vendor acknowledges by doing business or seeking to do business with Collin County that he/she has been notified of the requirements under Chapter 176 of the Texas Local Government Code and that he/she is solely responsible for complying with the terms and conditions therein. Furthermore, any individual or business entity seeking to do business with Collin County who does not comply with this practice may risk award consideration of any County contract.

For a listing of current Collin County Officers:

<http://www.collincountytx.gov/government/Pages/officials.aspx>

At the time of this solicitation being released, the following are known to be involved in the planning, recommending, selecting, and contracting for the attached procurement:

Department:

Bruce Sherbet – Elections Administrator

Cheryl Gorena – Office Administrator

Purchasing:

Michelle Charnoski, NIGP-CPP, CPPB – Purchasing Agent

Marci Chrismon, CPPB – Assistant Purchasing Agent

Susan Hayes - Buyer II

Commissioners Court:

Chris Hill – County Judge

Susan Fletcher – Commissioner Precinct No. 1

Cheryl Williams – Commissioner Precinct No. 2

Darrell Hale – Commissioner Precinct No. 3

Duncan Webb – Commissioner Precinct No. 4

# Request for Taxpayer Identification Number and Certification

**Give Form to the  
 requester. Do not  
 send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

<b>Print or type.</b>	<b>See Specific Instructions on page 3.</b>	<p><b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.</p> <hr/> <p><b>2</b> Business name/disregarded entity name, if different from above</p> <hr/> <p><b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor or single-member LLC      <input type="checkbox"/> C Corporation      <input type="checkbox"/> S Corporation      <input type="checkbox"/> Partnership      <input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____</p> <p><b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</p> <p><input type="checkbox"/> Other (see instructions) ▶ _____</p>	<p><b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p style="font-size: small;">(Applies to accounts maintained outside the U.S.)</p>
		<p><b>5</b> Address (number, street, and apt. or suite no.) See instructions.</p> <hr/> <p><b>6</b> City, state, and ZIP code</p> <hr/> <p><b>7</b> List account number(s) here (optional)</p> <hr/>	<p>Requester's name and address (optional)</p> <hr/>

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>											
				-			-				
<b>or</b>											
<b>Employer identification number</b>											
				-							

## Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
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## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*