

To be submitted on Offeror's official business letterhead

**PROPOSAL**

**TRANSMITTAL LETTER SOLICITATION RFP-24-03 HAWAI'I BRAND MANAGEMENT & MARKETING SERVICES FOR THE EUROPE MAJOR MARKET AREA**

Procurement Officer  
Hawai'i Tourism Authority  
Hawai'i Convention Center, First Level  
1801 Kalākaua Avenue  
Honolulu, Hawai'i 96815

Dear Procurement Officer:

The undersigned has carefully read and understands the terms and conditions specified in the General Provisions attached hereto, and in the General Conditions, by reference made a part hereof and available upon request; and hereby submits the following offer to perform the work specified herein, all in accordance with the true intent and meaning thereof. The undersigned further understands and agrees that by submitting this offer: 1) he/she is declaring his/her offer is not in violation of Chapter 84, Hawai'i Revised Statutes, concerning prohibited State contracts, and 2) he/she is certifying that the price(s) submitted was (were) independently arrived at without collusion.

Offeror is:

Sole Proprietor  Partnership  \*Corporation  Joint Venture

Other \_\_\_\_\_

\*State of incorporation: \_\_\_\_\_

Hawai'i General Excise Tax License I.D. No. \_\_\_\_\_

Federal I.D. No. \_\_\_\_\_

Payment address (other than street address below): \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Business address (street address): \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

If Offeror is a "dba" or a division of a corporation, furnish the exact legal name of the corporation under which the contract, if awarded, will be executed:

\_\_\_\_\_

Acknowledgment of receipt of addendum/addenda issued by the Hawai'i Tourism Authority in accordance with this solicitation: Record in the space below the date of receipt for each addendum.

Addendum No. 1 \_\_\_\_\_

Addendum No. 2 \_\_\_\_\_

Addendum No. 3 \_\_\_\_\_

Addendum No. 4 \_\_\_\_\_

The undersigned hereby certifies that the proposal attached has been carefully checked and is submitted as correct.

Respectfully submitted,

\_\_\_\_\_  
Date

\_\_\_\_\_  
Exact Legal Name of Offeror (Company name)

\_\_\_\_\_  
Telephone No.

\_\_\_\_\_  
Authorized signature (Attach corporate resolution or evidence of authorization to bind)

\_\_\_\_\_  
Fax No.

\_\_\_\_\_  
Name of Authorized Signer (Please Type or Print)

\_\_\_\_\_  
E-mail Address

\_\_\_\_\_  
Title

**OFFER TOTAL:**

Total contract cost for accomplishing the development and delivery of these services is

\$ \_\_\_\_\_

**Pricing must include labor, materials, supplies, all applicable taxes, and any other costs and fees incurred to provide the specified services.**

**CONFLICT OF INTEREST:**

By signature above, the Offeror represents that neither the Offeror, nor any of its principals, employees, or agent of the Offeror, presently has any interest, and promises that no such interest, direct or indirect, shall be acquired, that would or might conflict in any manner or degree with the Offeror's performance of this contract.

Conflict of Interest Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, attach list of potential conflict(s)

**CERTIFICATION OF NON-DEBARMENT**

By signature above, the Offeror certifies that neither the Offeror nor any of its principals, employees or agent of the Offeror are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any governmental department or agency. If the Offeror cannot certify this statement, attach a written explanation for review by the State.

Any debarment action Yes \_\_\_\_\_ No \_\_\_\_\_

Is yes, attach written explanation

**EXCEPTIONS:**

In accordance with Section 3.2.7, Offeror must reference the RFP SECTION where exception is taken, a description of the exception taken, and the proposed alternative, if any. If none, state so below.

Any exceptions

Yes\_\_\_\_\_

No\_\_\_\_\_

If yes, attach written explanation

**PREFERENCES:**

No preferences apply to this solicitation.