## Form B - IPG Active Registered Vendor Disclosures

Please read the following instructions carefully.

FORM B - IPG Active Registered Vendor Disclosures may be used when the vendor is registered in the Illinois Procurement Gateway (IPG) and does have an active unexpired State of Illinois Vendor Registration Number.

To verify registration, go to the Illinois Procurement Gateway (<a href="https://ipg.vendorreg.com">https://ipg.vendorreg.com</a>) and search the "IPG Registered Vendor Directory". If you do not find your company name, you will need to complete and submit your Illinois Vendor Registration on the website and you must submit FORM A - Vendor Disclosures with your solicitation response.

If the vendor is not registered in the IPG and does not have an active State of Illinois Vendor Registration Number with an unexpired date, the vendor must complete and submit the information requested on FORM A - Vendor Disclosures with their response.

Failure to provide the correct form may render the submission non-responsive and will result in disqualification.

This form is for vendors who have a valid, active registration in the IPG.

Please read this entire section and provide the requested information as applicable. All parts in Form B - IPG Active Registered Vendor Disclosures must be completed in full and submitted along with the vendor's response.

1.	Certification of Illinois Procurement Gateway Registration
	My business has registered in the IPG. The State of Illinois Chief Procurement Office approved the registration and
	provided the IPG Registration Number and Expiration Date disclosed below:

System Vendor Number:		
State of Illinois Vendor Registration Number:	IPG -	
IPG Expiration Date:		

2. Certification Timely to this Solicitation

Vendor certifies it is not barred from having a contract with the State based upon violating the prohibitions related to either submitting/writing specifications or providing assistance to an employee of the State of Illinois by reviewing, drafting, directing, or preparing any invitation for bids, a request for proposal, or request of information, or similar assistance (except as part of a public request for such information). 30 ILCS 500/50-10.5(e), amended by Public Act No. 97-0895 (August 3, 2012).

□Voc	□No
1 IYes	I IINO

3. Disclosure of Lobbyist or Agent (Complete only if bid, offer, or contract has an annual value over \$50,000)
Is your company or parent entity(ies) represented by, or do you or your parent entity(ies) employ, a lobbyist required to register under the Lobbyist Registration Act (lobbyist must be registered pursuant to the Act with the Secretary of State) or an agent who has communicated, is communicating, or may communicate with any State/Public University officer or employee concerning this solicitation?

Yes	∏No
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If yes, identify each lobbyist and agent, including the name and address below. If you have a lobbyist that does not meet the criteria, then you do not have to disclose the lobbyist's information. Attach an additional page in the same format as provided below, if necessary.

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	Name		Address		Relationship to Disclosing Entity			
			sation/reimbursements rela n this University contract (a					
Co no	Disclosure of Pending and Current Contracts  Complete only if: (a) your business is for-profit and (b) the bid, offer, or contract has an annual value over \$50,000. Do not complete if you are a not-for-profit entity.							
			ling contracts, bids, proposate of Illinois government?	ais, subcontract	s, leases or	otner ong	oing procurement	
	Yes	No						
	If "Yes", ple	ase specify b	elow. Attach an additional	page in the sam	ne format as	provided		
	Agency/Universit	у	Project Title	Status	v	/alue	Contract Reference/ P.O./Illinois Procurement Bulletin #	
•	gnature of the date signe	d below, I ce	rtify that:					
	current.	fications and	ion, certifications and disclo					
bio	dder, offeror, ven	dor, or vendo	ed Vendor Disclosures is sig or pursuant to Sections 50-1 e financial disclosures is ma	13 and 50-35 of	the Illinois F	Procureme	-	
is inforn	nation is submitte	ed on behalf o	of:					
ndor Co	or Contact:		Sig	Signature:				
ndor Na	or Name:		Pho	Phone:				
eet Ado	t Address:		Cit	City, State, Zip:				
ndor Er	dor Email:			Date:				