



STATE OF ARKANSAS
**Department of Finance
and Administration**

OFFICE OF STATE PROCUREMENT

1509 West Seventh Street, Suite 300
Little Rock, Arkansas 72201-4222
Phone: (501) 324-9316
Fax (501) 324-9311
<http://www.arkansas.gov>

May 5, 2015

Senator Bill Sample, Co-Chair
Representative David Branscum, Co-Chair
Arkansas Legislative Council
Little Rock, AR 72201

RE: Contract Disclosure

Dear Senator Sample and Representative Branscum:

The Arkansas State Police wishes to award a contract to JSJ Ford, DBA Allison Ford Lincoln Co., which was solicited through a request for quotation process. This process was chosen because the value of the contract does not exceed \$50,000. Stephen Magie, Secretary and 33% owner of JSJ Ford, DBA Allison Ford Lincoln Co., has disclosed that he is a current State Representative. Therefore, I am submitting this contract for the review of the Arkansas Legislative Council in accordance with the provisions of Ark. Code Ann. § 19-11-264.

The Office of State Procurement confirms that this contract meets the solicitation requirement and criteria, and that the Arkansas State Police properly complied with the procurement process. Accordingly, I conclude that this contract has fulfilled all the necessary requirements to create a legal contract.

Respectfully yours,

A handwritten signature in cursive script that reads "Camber Thompson".

Camber Thompson, Administrator
Office of State Procurement



ARKANSAS STATE POLICE

ASP-31
(Rev. 05/03)

Fiscal Affairs Special Offers And Verbal Quotes Form

Date: 05/01/2015
Month/Day/Year

Vendor 1	Vendor 2	Vendor 3
Allison Ford Lincoln Co. P O Box 843 Morrilton AR 72110 PH 501/354-4541 FAX 501/354-0172 jlmagie@allison-ford.com John Magie, Pres.	Randall Ford 550 5500 Rogers Ave Ft Smith AR 72903 PH 479/452-1311 FAX 479/452-7173 fday@RandallFord.com Frank Day	Smart Ford PH 501/332-5414 FAX 501/781-7221 ctarkington@smartdrive.com

Quantity	Item/Description	Vendor Quotation		
1 each	2015 One Ton Truck Single rear wheel crew cab with 6-3/4 wide box bed, 4x4 diesel powered Delivery required within 90 calendar days after receipt of order...Please specify	\$42,572.00 90 Calendar Days ARO	43,341.00 90 Calendar Days ARO With the engine and transmission ordered, Ford requires a 3:31 rear axle	NO RESPONSE/NO BID

Above quote does ☐/does not ☒ include sales tax.
All quotes are FOB ASP Headquarters Little Rock, AR.

Prices secured and awarded as circled above by: _____
(Signature)

The **TAX ID NUMBER** and **BUSINESS DESIGNATION** must be furnished for the low bidder.

TAX IDENTIFICATION NUMBER

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OR

SOCIAL SECURITY NUMBER

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BUSINES DESIGNATION (Circle One):

Individual
Sole Proprietorship
Partnership
Corporation
Public Service Commission
Governmental/Non-Profit

CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM

Failure to complete all of the following information may result in a delay in obtaining a contract, lease, purchase agreement, or grant award with any Arkansas State Agency.

SOCIAL SECURITY NUMBER: _____ FEDERAL ID NUMBER: _____ SUBCONTRACTOR: ☐ Yes ☒ No SUBCONTRACTOR NAME: _____
TAXPAYER ID #: _____ OR 71 — 0706005

TAXPAYER ID NAME: JSJ Ford Inc. DBA Allison Ford Lincoln Co. IS THIS FOR: ☐ Goods? ☐ Services? ☒ Both?

YOUR LAST NAME: Magie FIRST NAME: John M.I.: L

ADDRESS: PO Box 843

CITY: Morrilton STATE: AR ZIP CODE: 72110 COUNTRY: USA

AS A CONDITION OF OBTAINING, EXTENDING, AMENDING, OR RENEWING A CONTRACT, LEASE, PURCHASE AGREEMENT, OR GRANT AWARD WITH ANY ARKANSAS STATE AGENCY, THE FOLLOWING INFORMATION MUST BE DISCLOSED:

FOR INDIVIDUALS *

Indicate below if: you, your spouse or the brother, sister, parent, or child of you or your spouse is a current or former: member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee:

Position Held	Mark (v)		Name of Position of Job Held [senator, representative, name of board/ commission, data entry, etc.]	For How Long?		What is the person(s) name and how are they related to you? [i.e., Jane Q. Public, spouse, John Q. Public, Jr., child, etc.]	
	Current	Former		From MM/YY	To MM/YY	Person's Name(s)	Relation
General Assembly	X		Representative	01/13	04/15	Stephen K. Magie	Brother
Constitutional Officer							
State Board or Commission Member							
State Employee	X		DHS - Grant Analyst	09/80	04/15	Wayne Hoyt	Brother in Law

☐ None of the above applies

FOR AN ENTITY (BUSINESS) *

Indicate below if any of the following persons, current or former, hold any position of control or hold any ownership interest of 10% or greater in the entity: member of the General Assembly, Constitutional Officer, State Board or Commission Member, State Employee, or the spouse, brother, sister, parent, or child of a member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee. Position of control means the power to direct the purchasing policies or influence the management of the entity.

Position Held	Mark (v)		Name of Position of Job Held [senator, representative, name of board/commission, data entry, etc.]	For How Long?		What is the person(s) name and what is his/her % of ownership interest and/or what is his/her position of control?		
	Current	Former		From MM/YY	To MM/YY	Person's Name(s)	Ownership Interest (%)	Position of Control
General Assembly	X		Representative	01/13	04/15	Stephen K. Magie	33%	Secretary
Constitutional Officer								
State Board or Commission Member								
State Employee								

☐ None of the above applies

Contract and Grant Disclosure and Certification Form

Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this contract. Any contractor, whether an individual or entity, who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the agency.

As an additional condition of obtaining, extending, amending, or renewing a contract with a state agency I agree as follows:

1. Prior to entering into any agreement with any subcontractor, prior or subsequent to the contract date, I will require the subcontractor to complete a **CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM**. Subcontractor shall mean any person or entity with whom I enter an agreement whereby I assign or otherwise delegate to the person or entity, for consideration, all, or any part, of the performance required of me under the terms of my contract with the state agency.

2. I will include the following language as a part of any agreement with a subcontractor:

Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this subcontract. The party who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the contractor.

3. No later than ten (10) days after entering into any agreement with a subcontractor, whether prior or subsequent to the contract date, I will mail a copy of the **CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM** completed by the subcontractor and a statement containing the dollar amount of the subcontract to the state agency.

I certify under penalty of perjury, to the best of my knowledge and belief, all of the above information is true and correct and that I agree to the subcontractor disclosure conditions stated herein.

Signature [Signature] Title President Date 4/30/2015
Vendor Contact Person John Magie Title President Phone No. 501-354-4541

Agency use only

Agency Number 0960 Agency Name ARK STATE POLICE Agency Contact Person LINDA ARMSTRONG Contact Phone No. 501-618-8182 Contract or Grant No. 4501530965

STATE VEHICLE REQUEST

Fiscal Year 2015

0960
31TON

AGENCY: DEPARTMENT OF ARKANSAS STATE POLICE -										AGENCY CODE: 0960				
Address: #1 STATE POLICE PLAZA DRIVE										Prepared by: Donna Williams				
LITTLE ROCK AR 72209										Telephone #: 501-618-8115				
REQUESTED VEHICLE					VEHICLE TO BE REPLACED							TO BE COMPLETED BY DFA - OFFICE OF INFORMATION SERVICES		
REQ TYPE	FUNDING SOURCE	P L	CONT TYPE	OPTIONS	SERIAL CODE	LICENSE #	YEAR	MAKE	MODEL BODY STYLE	ACTUAL MILEAGE	REPL CODE	REQUEST NUMBER	DATE APPROVED	INITIALS
1 R	Agency	N	BID		6459	205226	2005	FORD	PICKUP 3/4 TON	75,252	A	41115	4/17	(JN)

2015 1 ton truck, Single Rear Wheel Crew Cab w/ 3/4 wide box bed
4x4 Diesel

= NOT PREVIOUSLY APPROVED

NOT LIKE FOR LIKE

REQUESTING

1 TON TRUCK

TURN IN

3/4 TON TRUCK

GONE TO H&R

C#

DFA - Office of Information Services will purchase all vehicles where the requested type and requesting Agency are covered by Arkansas Code 22-8-203 through 22-8-204. Substitutions for vehicles scheduled for replacement will not be made without prior approval from DFA - Office of Information Services.

Department Director's Signature:

Jim K. Muehlen

Date:

1/26/15