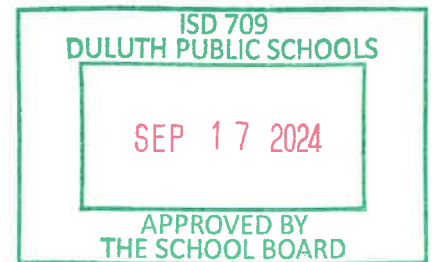


**INDEPENDENT SCHOOL DISTRICT NO. 709**  
Duluth Public Schools  
709 Portia Johnson Drive  
Duluth, Minnesota 55811  
218-336-8738



**MEMORANDUM**

**To:** Simone Zunich, Executive Director of Finance & Business Services  
**From:** Cathy Holman, Purchasing Coordinator  
**Subject:** **RFP-329 B/W PRINT SHOP COPIER SERVICE**  
**Date:** September 6, 2024

Two vendors were invited to submit their proposal to RFP #329 for B/W Print Shop Copier Service.

Both vendors responded meeting required specification with modifications that were taken into consideration.

**VENDOR**

GREAT LAKES OFFICE SOLUTIONS	\$3,910.00 P/M
MARCO	\$4,470.00 P/M

Terry McEwen, Print Shop Coordinator, Cathy Holman and Zachary DeCaro of the Purchasing Department were present with one representative from Great Lakes Office Solutions when the two RFP's were opened. analyzed the RFP for accuracy and fulfillment.

Terry McEwen, Print Shop Coordinator, analyzed the RFP for accuracy and fulfillment and recommends accepting GREAT LAKES OFFICE SOLUTION'S proposal meeting specifications as submitted.

**Fund:** 01 E 012 110 000 370 130

**Program:** Print Shop

**Fund Custodian:** Terry McEwen/Print Shop

  
\_\_\_\_\_  
Jill Lofald, Board Chair

**INDEPENDENT SCHOOL DISTRICT NO. 709**

Duluth Public Schools  
709 Portia Johnson Drive  
Duluth, Minnesota 55811  
218-336-8738

**RFP-329**  
**B/W PRINT SHOP COPIER SERVICE**  
**CONTRACT**

**DUE: September 4, 2024 - 2:00 P.M.**

INDEPENDENT SCHOOL DISTRICT NO. 709

RFP-329

B/W PRINT SHOP COPIER SERVICE CONTRACT

SPECIFICATIONS PAGE

1 OF 4

**I. PROPOSAL INSTRUCTIONS**

**A. DEADLINE FOR RECEIPT OF PROPOSAL**

1. Sealed proposals must be received at the Independent School District No. 709, 709 Portia Johnson Drive, Room 211 - Purchasing Office, Duluth, Minnesota 55811 no later than Wednesday, September 4, 2024 at 2:00 P.M. All proposals must be clearly marked: **"RFP-329 B/W PRINT SHOP COPIER SERVICE CONTRACT"**.

**B. RIGHTS**

1. Independent School District No. 709 (known hereafter as ISD 709) reserves the right to waive informalities, to reject any or all proposals, and to make decisions in the best interest of the school district.
2. ISD 709 reserves the right to negotiate any or all portions of the contract.
3. Each proposal will be reviewed as to how it best meets the specifications and the best interests of ISD 709. Areas for review, in addition to cost, include: range of available technical services, depth and experience of personnel, and experience in providing copier services to school districts.

**C. INTERPRETATION OF SPECIFICATIONS**

Any questions regarding these specifications should be referred to Cathy Holman, Purchasing Coordinator, ISD 709, 709 Portia Johnson Drive, Room 211, Duluth, MN. 55811. Phone: 218-336-8738.

**D. RFP REQUIREMENTS**

1. Vendor must submit the attached Form of Proposal, using the exact form provided or a copy thereof.

INDEPENDENT SCHOOL DISTRICT NO. 709

RFP-329

B/W PRINT SHOP COPIER SERVICE CONTRACT

SPECIFICATIONS PAGE

2 OF 4

2. Vendor must submit a resume of their firm including a brief history of the firm, and a description of the firm's experience in providing on-site copier service for educational clients.

**II. THE VENDOR RESPONDING TO THIS REQUEST FOR PROPOSAL SHALL:**

1. Supply all data requested on the Form of Proposal provided by ISD 709.
2. Be prepared to start service on Oct 1, 2024, if awarded this contract.
3. **Respond on the provided forms. Failure to complete ISD 709's Form of Proposal response sheets will disqualify your firm from consideration.**
4. Include supplementary information in their own format as needed to explain the capabilities and history of the company.
5. **Provide contract pricing per copy that includes all parts, staples, labor, travel and toner supplies for all machines. Parts and toner shall meet or exceed OEM specifications.**
6. Have an adequate number of sufficiently trained technicians to service Konica Minolta equipment per the number of copiers listed on the Form of Proposal.
7. Maintain all copiers considered part of this contract in a fully usable fashion as expected by ISD 709 staff.

**III. BONDS**

1. A bid bond and a performance bond are not requested.

INDEPENDENT SCHOOL DISTRICT NO. 709

RFP-329

B/W PRINT SHOP COPIER SERVICE CONTRACT

SPECIFICATIONS

PAGE 3 OF 4

**IV. CONTRACT PROVISIONS**

**A. DURATION OF THE CONTRACT**

The contract provisions shall be for a four (4) year period, commencing October 1, 2024 through June 30, 2028 with annual renewals by mutual agreement. (Each year is defined as July 1st through June 30th of the following year.) As approved by the school board on September 17, 2024.

ISD 709 reserves the right to renew and negotiate the contract for four (4) one (1) year terms. Should the parties not agree to the rates for the additional years of the contract, then this contract shall terminate at the end of the last agreed upon contract period. (Rate increases are limited to the Consumer Price Index, Midwest Region.)

**B. SCOPE**

This contract will cover all copiers listed on the Request for Proposal and any copiers added during the course of the contract period. Copiers may also be removed at any time during the contract period at no penalty or cost to ISD 709.

**C. COMPENSATION**

ISD 709 shall pay the cost of copier services according to the rate schedule listed. Payments will be made on a monthly basis or on an agreed payment schedule. Billing invoices will be arranged to best serve ISD 709's needs and will indicate the charges of each site by actual usage figures.

**D. TERMINATION**

This contract may be terminated at any time by ISD 709 for nonperformance, or failure to provide the copier services as outlined in this contract. Termination of this contract may be implemented by ISD 709 with a thirty (30) day written notice to the awarded vendor.

INDEPENDENT SCHOOL DISTRICT NO. 709

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B/W PRINT SHOP COPIER SERVICE CONTRACT

SPECIFICATIONS


PAGE 4 OF 4

**E. INSURANCE REQUIREMENTS**

The vendor shall carry insurance as outlined, and for the amounts listed on the attached sheet, "Supplementary Conditions & Insurance Requirements for Independent Contractors". Prior to the commencement of work, the vendor shall provide ISD 709 with Certificates of Insurance. ISD 709 shall be listed on the insurance policy to receive a "Notice of Cancellation", directly from the insurance agent should that event occur. This includes naming ISD 709 as "additional insured".

**F. AWARD CRITERIA BASED UPON, BUT NOT LIMITED TO:**

1. Cost per copy
2. Response time capabilities
3. Technicians' experience
4. Past vendor experience with ISD 709
5. Past vendor service experience with Konica Minolta copiers of comparable models to what is owned by ISD 709
6. Ability to provide parts and toner that meet or exceed OEM specifications



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Cathy Holman, Purchasing Coordinator

INDEPENDENT SCHOOL DISTRICT NO. 709

RFP-329

B/W PRINT SHOP COPIER SERVICE CONTRACT

FORM OF PROPOSAL

PAGE 1 OF 5

**NOTE:** These quantities are subject to change prior to actual service agreements being made with the vendor. In addition, quantities in each segment will change during the course of the contract.

**EQUIPMENT**

- 1) **Konica Minolta New Accurio Press 7120 Series  
W/ GBC Punch PK-525  
W/ Staple Finisher SD-510**
  
- 1) **Konica Minolta New Accurio Press 7120 Series  
W/Saddle Finisher SD-513F  
W/Punch Kit PK-525  
W Folding Unit FD-504**
  
- 2) **Konica Minolta New Accurio Press 7120 Series  
W/Staple Finisher SD-510**

**Total (4) Konica Minolta 7120 Series Copiers with an estimated annual total volume of 8.8 MM copies/prints per year.**

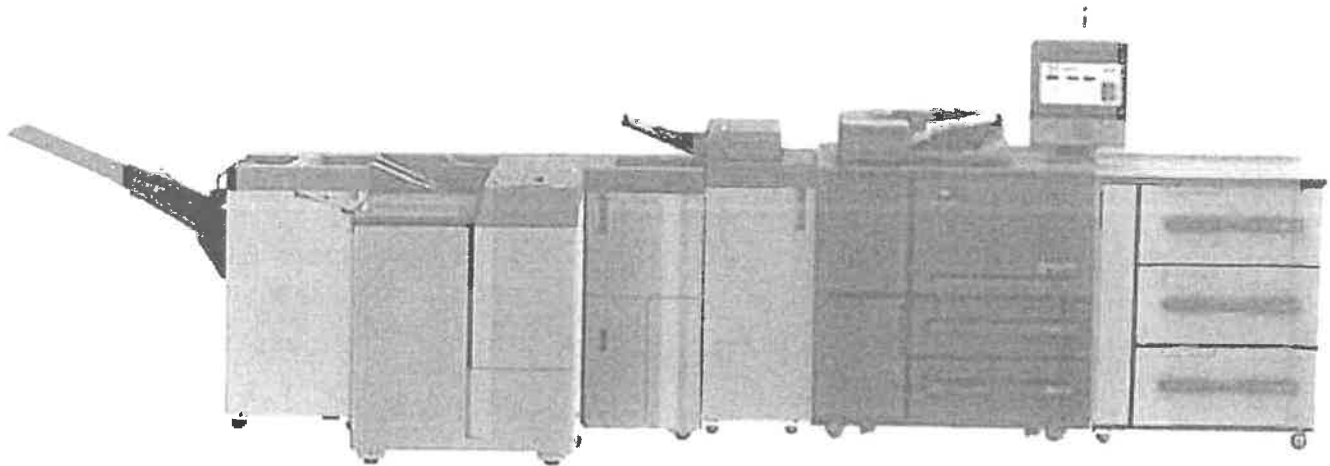
**Proposed cost/per copy \_\_\_\_\_ X 8.8 Million copies estimated annual usage \$ \_\_\_\_\_**



**WIDTH**  
202.36 inches

**DEPTH**  
56.34 inches


**HEIGHT**  
57.48 inches



1 x NEMA L6 - 30R  3 x NEMA 5 - 15R 

 **COLOR**

 **BW**

 **PAPER SIZE**  
12.76 x 19.02

 **MAX PAPER CAPACITY (80g/m<sup>2</sup>)**  
8000

## OPTION LIST

Name	Item No.	Quantity	Name	Item No.	Quantity
Main Body		1	Punch Kit - PK-525	AC8UW11	1
Large Capacity Unit - PF-710	A9JXWY2	1	Folding Unit - FD-504	A65VWY1	1
Staple Finisher - FS-541	AAUUWY1	1	Saddle Stitcher - SD-513/F	A729WY1	1
Saddle Stitcher - SD-513	A65UWY2	1	Status Indicator Light - KONI66002BW	KONI66002BW	1
Relay Unit - RU-518m	A9CEWY2	1	Power filter - P350030240NH - P350030240NH	P350030240NH	1

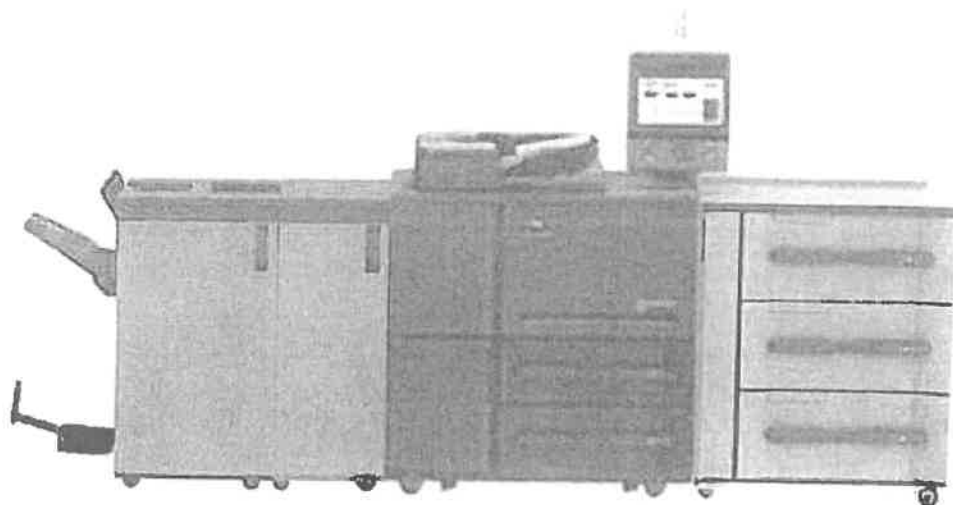




**WIDTH**  
129.72 inches

**DEPTH**  
35.83 inches

**HEIGHT**  
57.48 inches



1 x NEMA L6 - 30R  1 x NEMA 5 - 15R 

 **COLOR**

 **B/W**

 **PAPER SIZE**  
12.76 x 19.02

 **MAX PAPER CAPACITY (80g/m<sup>2</sup>)**  
8000

## OPTION LIST

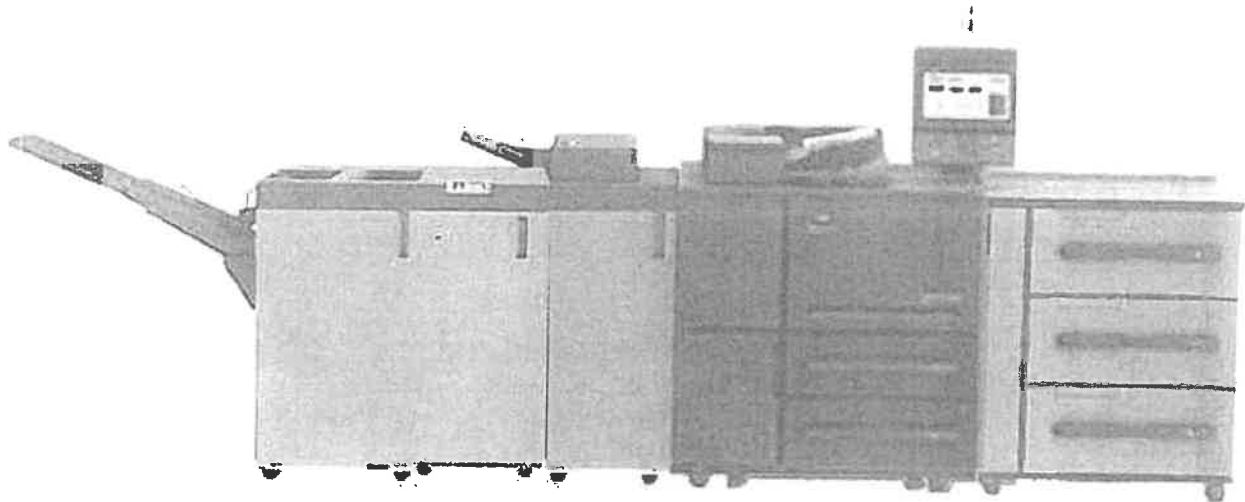
Name	Item No.	Quantity	Name	Item No.	Quantity
Main Body		1	Punch Kit - PK-525	AC8UW11	1
Large Capacity Unit - PF-710	A9JXWY2	1	Saddle Stitch Kit - SD-510	A4F4WY1	1
Staple Finisher - FS-532m	A4F3WY6	1	Status Indicator Light - KONI66002BW	KONI66002BW	1
Relay Unit - RU-510	A4FCWY2	1	Power filter - P350030240NH - P350030240NH	P350030240NH	1



**WIDTH**  
171 Inches

**DEPTH**  
35.83 inches


**HEIGHT**  
57.48 inches



1 x NEMA L6 - 30R  3 x NEMA 5 - 15R 

 **COLOR**

 **B/W**

 **PAPER SIZE**  
12.76 x 19.02

 **MAX PAPER CAPACITY (80g/m<sup>2</sup>)**  
8000

## OPTION LIST

Name	Item No.	Quantity	Name	Item No.	Quantity
Main Body		1	Punch Kit - PK-525	AC8UW11	1
Large Capacity Unit - PF-710	A9JXWY2	1	Mount Kit for 3rd Party Options - MK-737	A6H9WY2	2
Staple Finisher - FS-541	AAUUWY1	1	DIE, CombBind, 19/21H HD	7714919	1
Relay Unit - RU-518m	A9CEWY2	1	Status Indicator Light - KONI66002BW	KONI66002BW	1
GBC PUNCH G3	WSM7724400	1	Power filter - P350030240NH - P350030240NH	P350030240NH	1

INDEPENDENT SCHOOL DISTRICT NO. 709

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B/W PRINT SHOP COPIER SERVICE CONTRACT

FORM OF PROPOSAL

PAGE 2 OF 5

- A. ISD 709 reserves the right to add additional equipment in each segment at that existing schedule.

\* All rate increases in subsequent years shall be in accordance with the Consumer Price Index for the Midwest Region and shall be negotiated from this basis.

**Note:** Machine count totals are not guaranteed and represent the cost per copy for the award of Request for Proposal. These figures represent the current agreement's approximate totals. These totals will fluctuate with equipment additions or deletions during the course of the contract period.

A complete equipment swap or replacement is not part of the plan for the contract period. Proposals should be based upon the equipment list provided.

VENDOR: \_\_\_\_\_

INDEPENDENT SCHOOL DISTRICT NO. 709

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FORM OF PROPOSAL

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B. SUPPLEMENTAL DATA

1. Names of other school districts and information relative to copier services your company provides at present:

<u>Name of School District:</u>	<u>No. of School Years:</u>	<u>No. of Employees:</u>	<u>No. of Copiers:</u>
_____			
_____			
_____			
_____			
_____			

2. Number of personnel employed by your company:

Sales:

Service Techs:

Office Personnel:

Total Personnel:

3. The person(s) in your company who will ensure compliance with the provisions of the contract:

\_\_\_\_\_ (Name/Title)

\_\_\_\_\_ (Name/Title)

VENDOR: \_\_\_\_\_

INDEPENDENT SCHOOL DISTRICT NO. 709

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FORM OF PROPOSAL

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4. Additional information, which will clarify or further explain your proposal:

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VENDOR: \_\_\_\_\_

INDEPENDENT SCHOOL DISTRICT NO. 709

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B/W PRINT SHOP COPIER SERVICE CONTRACT

FORM OF PROPOSAL

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\*\* No purchase will be made from an employee of the School District, nor from a member of the immediate household of an employee.

\*\* No purchase will be made from a member of the School board, nor from a member of his/her immediate household, nor from any enterprise in which he/she holds a substantial interest, except for public utilities.

I, the person authorized to sign the Form of Proposal, have read the above policy.

This policy\_\_ proposal. restricts \_\_ does not restrict me, or the firm from submitting a request for

If this policy restricts you from bidding, please explain: \_\_\_\_\_  
\_\_\_\_\_

The undersigned, having carefully examined the specifications for Copier Service Contract, do hereby propose to enter into contract with Independent School District No. 709 based on the strict accordance with the specifications as per the attached.

VENDOR : \_\_\_\_\_

AUTHORIZED BY

SIGNATURE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_