BID RESPONSE PACKET

S000000505

User Acceptance Testing

BID SIGNATURE PAGE

PROSPECTIVE CONTRACTOR'S INFORMATION					
Company:	E-Logic, Inc.				
Address:	*2000 Pennsylvania Avenue NW, STE 7000,*				
City:	*Washington*	State:	*DC*	Zip Code:	*20006*

PROSPECTIVE CONTRACTOR CONTACT INFORMATION *Provide contact information to be used for Solicitation related matters.*			
Contact Person:	Luis Padilla	Title:	President & CEO
Phone:	+1 (202) 499-7837	Alternate Phone:	+1 (202) 499-7839
Email:	Lpadilla@e-logic.us		

CONFIRMATION OF REDACTED COPY

☐ YES, a redacted copy of submission documents is enclosed.

☐ NO, a redacted copy of submission documents is not enclosed. I understand a full copy of non-redacted submission documents will be released if requested.

If a redacted copy of the submission documents is not provided with Prospective Contractor's response packet, and neither box is checked, a copy of the non-redacted documents, except for financial data (other than pricing), will be released in response to any request made under the Arkansas Freedom of Information Act (FOIA). See the *Proprietary Information* section of the Solicitation.

REQUIRED CERTIFICATIONS

By signing and submitting a response to this Solicitation, Prospective Contractor represents, warrants, and certifies that they are not a Scrutinized Company and they do not currently and shall not for the aggregate term of a resultant contract:

- Boycott Israel.
- Knowingly employ or contract with illegal immigrants.
- Boycott Energy, Fossil Fuel, Firearms, or Ammunition Industries.
- Employ a Scrutinized Company as a contractor.

Prospective Contractor represents, warrants, and certifies that it shall not become a Scrutinized Company during the aggregate term of a contract resulting from this Solicitation. The Prospective Contractor further represents, warrants, and certifies in shall in all other respects comply with the laws, rules, and executive orders of the state that apply to the Contractor's performance during the aggregate term of a contract resulting from this Solicitation.

An official authorized to bind the Prospective Contractor to a resultant contract **shall** sign below. The signature below signifies agreement that any exception that conflicts with a Requirement of this Solicitation may cause the Prospective Contractor's bid to be rejected.

Authorized Signature:  **Title:** President & CEO

Printed/Typed Name: Luis Padilla **Date:** 06/26/2026

SUBMISSION REQUIREMENTS CHECKLIST

The following items **must** be submitted with the Prospective Contractor's bid*:*

- [x] *Bid Signature Page*
- [x] *Proposed Subcontractors Form*
- [x] *IFB Requirement Acknowledgements*
- [x] Copy of Prospective Contractor's *Equal Opportunity Policy*
- [x] *Official Bid Price Sheet*

The following items, which **must** be submitted prior to a contract award to the Prospective Contractor, may also be included with the Prospective Contractor's bid:

- [x] EO 98-04: *Contract and Grant Disclosure Form*
- [x] *Voluntary Product Accessibility Template* (VPAT), if applicable

PROPOSED SUBCONTRACTORS FORM

Prospective Contractors **shall** complete the form for all subcontractors the Prospective Contractor proposes to use under a resulting contract (*Services Contract (SRV-1) Fillable Form*, section 14). If the Prospective Contractor does not intend to use subcontractor(s), Prospective Contractor should indicate so by checking the appropriate box.

Prospective Contractors should not include additional information relating to subcontractors on this form or as an attachment to this form.

Prospective Contractor proposes to use the following subcontractor(s) under a resulting contract:

SUBCONTRACTOR'S COMPANY NAME	SERVICE PERFORMED	STREET ADDRESS	CITY, STATE, ZIP

☒ **Prospective Contractor does not propose to use subcontractors under a resulting contract.**

IFB REQUIREMENT ACKNOWLEDGEMENTS

Prospective Contractor represents, warrants, and certifies that:

- ☐ NO, the Prospective Contractor is not the creator of the software being tested
- ☐ YES, the Prospective Contractor has performed at least three (3) similar functional services for other state government entities within the past five (5) years.
- ☒ YES, the Prospective Contractor has key personnel to assign to the State's account who have at least:

  Three (3) years of experience working on relevant projects supporting state human service programs such as Medicaid, CHIP, SNAP, or TEA.

  Five (5) years of previous experience of UAT work on at least one (1) eligibility engagement that supported multiple benefit programs.

Authorized Signature: _____ **Title:** President & CEO

Printed/Typed Name: Luis Padilla **Date:** 06/26/2026

Official Solicitation Price Sheet
S000000505 User Acceptance Testing (UAT)
Arkansas Department of Human Services

Prospective Contractors Name: E-Logic,Inc.

1 Prospective Contractor should enter name in the blue-shaded cell at the top labeled Prospective Contractor name.
2 Prospective Contractor shall enter responses in the blue-shaded cells only and shall not otherwise alter this sheet.
3 For Items 1-4 (Table 1), Prospective Contractor shall enter the "Cost Per Month" for each specified position required to be provided in the blue-shaded cells.
4 The total for each row 1-4 will automatically populate " Estimated Monthly Rate."
5 The total for Table 1 will automatically populate "Total Estimated Monthly Rate.
6 For Items 5-8 (Table 2), Prospective Contractor shall enter the "Cost Per Month" for each of the additional positions as requested in the blue-shaded cells.
7 The total for each row 5-8 will automatically populate "Estimated Monthly Rate."
8 If this price sheet does not allow for accurate pricing, Prospective Contractor should notify the OSP Procurement Specialist during the Clarification of Solicitation period.

Table 1: To be used in low-cost determination (See IFB Section 2.10 B)

Item	UAT Position	Cost Per Month	Estimated Number of Positions	Estimated Monthly Rate
1	UAT Manager	$19,517.00	1	$19,517.00
2	UAT Lead	$15,234.00	3	$45,702.00
3	UAT Tester	$11,480.00	35	$401,800.00
4	UAT Bilingual (Spanish) Tester	$11,922.00	1	$11,922.00
			Total Estimated Monthly Rate	**$478,941.00**

Table 2: Not to be used in low-cost determination (See IFB Section 2.10 D)

Item	UAT Position	Cost Per Month	Estimated Number of Positions	Estimated Monthly Rate
5	Additional UAT Manager	$19,517.00	1	$19,517.00
6	Additional UAT Lead	$15,234.00	1	$15,234.00
7	Additional UAT Tester	$11,480.00	1	$11,480.00
8	Additional Bilingual (Spanish) Tester	$11,922.00	1	$11,922.00