Attachment A

Gasoline and Diesel Fuel

PRICING SUMMARY

Note: Pricing is to be firm through June 30, 2025.

DELIVERY AND PRICING

1. **Delivery**. If your Bid is accepted and a contract is executed, state the amount of time you need to deliver the fuel ordered: 24 hours or sooner. 24 hours from order placement preferred.

You must be able to deliver the fuel as specified in your Bid. Failure to do so may result in City terminating you contract or cancelling the Purchase Order, as well as any other damages to which it may be entitled in law and in equity.

2. Pricing. You agree to sell the City the following fuel and delivery according to the fixed prices shown below. You must state the total cost necessary to provide all fuel and delivery, including all stop and freight charges, superfund charges and any other charges not specifically identified, shipping F.O.B. Broken Arrow, Oklahoma (prepaid freight), and excluding all federal excise and state sales taxes from which the City is exempt. All costs incidental to this commodity and service are to be included in your bid price.

Quantities listed are for evaluation purposes only. Quantity shown is the estimated fuel usage the City anticipates it will use for the contract period. There is no guaranteed quantity of purchase under this contract

Item	Description	Quantity	Unit cost/gallon at **OPIS rack aver posting	oove Total annual cost age
1	Unleaded Gasoline 87 Octane	255,000 gallons*	-0.004	-1,020.00
2	2 Diesel Fuel #2 blended for climatic conditions	268,000 gallons*	-0.0075	-2,010.00
Total Annual Cost				\$ <u>-3,030.00</u>
1.Opti	ional.			
Portat	ole Diesel Fuel Tank	2,000 gallo	ns*	\$
Portable Unleaded Fuel Tank		2,000 gallons*		\$

Attachment A (Continuation)

* Estimated annual usage for evaluation purposes

** OPIS is the Oil Price Information Service "Wholesale" is the current OPIS "Rack Average" Price for this market

Annual Price Adjustment: The prices bid for this contract shall not increase during the initial term of the contract. If you anticipate that you will not be able to maintain firm prices for any renewal period, a change in price is allowed, however, you must show your cost increase formula or percentage of increase you anticipate:

a) Show Annual Price Adjustment:

N/A - no adjustment

Note: Any price increase you indicate will be included in evaluation of your bid.

b) You must notify the City, in writing, no later than 30 days before the initial contract period ends, or any renewal period ends, of your intent to exercise the price change formula in you bid. Failure to notify the City may result in the City denying any price increases. In no event can the proposed price change exceed that possible under the choice in your bid.

Attachment A (Continuation)

\$____

\$

1.List fuel surcharge pricing.

2.List other optional services along with pricing.

3.List any value-added services and / or volume discount information.

Comments/Notes: Bobtail delivery add \$0.27 for unlead gas and \$0.29 for diesel for each gallon.

Attachment B

Terms and Signature Sheet

Indicate length of time requires, in calendar days, for delivery/completion after notification of award (oral or written), as this may be a factor in making an award. __anywhere from 5 to 10 __Calendar days.

All prices shall be F.O.B. Destination: Location shown within bid documents under the heading GP-5 or as may be stated on the purchase order or verbal instructions given at time order is placed.

In compliance with this invitation for **<u>Bid 25.100</u>** and subject to all conditions thereof, the undersigned offers and agrees to furnish any or all items and/or services upon which prices are quoted, at the price quoted as specified.

My signature certifies that the accompanying bid is not the result of or affected by, any act of collusion with another person or company engaged in the same line of business or commerce, or any act of fraud punishable under Federal, State, or City Law. Furthermore, I understand that fraudulent and collusive bidding is a crime under Federal, State, and City Law and can result in fines, prison sentences, and civil damage awards. I hereby certify that I am authorized to sign this bid for the bidder.

If you desire not to bid on this Invitation, forward your acknowledgement of "No Bid". Return of **only** the "**Statement of No Interest Sheet**" with authorized signature and indicate the reason for "No Bid". Failure to comply may be cause for removal of your company's name from the bid list for the subject commodity and/or service.

Complete Legal Name of Bidder:

Offen Petroleum LLC	Date: 8/16/24
Company Name	
Address: 5100 E 78th Ave., Commerce City, CO., 80022	
Signature: <u>Miliana Kafaf</u> Official Title: <u>Government Manager</u>	Zip
Please print or type name clearly: Giuliana Kafaf	
Telephone Number: 720-545-2686 Ext:	
Email Address: opgovbid@offenpetro.com & giuliana.kafaf@offenpetro.com	
Federal Tax ID Number 84-1101310	

THIS BID IS INVALID IF NOT SIGNED BY AUTHORIZED AGENT AND NOTARIZED

Attachment C

References

Provide a listing of at least three (3) references, preferably school districts but certainly companies of similar size/volume, for whom you have provided these services within the last three (3) years.

(1) Customer Name: Moore Public Schools	_Telephone: <u>405-735-4080</u>		
Contact Name: Robert Benjamin	Title: Purchasing Agent		
Address: 404 N Chestnut Ave., Moore, OK., 73160-4	833		
Email Address: robertbenjamin@mooreschools.com			
(2) Customer Name: Creek County Highway Dept			
Contact Name: Jana Thomas	Title: Purchasing Agent		
Address: 10920 S Highway 99, Drumright, OK., 740	30-6032		
Email Address: jthomas@creekcountyonline.com			
(3) Customer Name: Owasso Public School	Telephone: <u>918-274-1904</u>		
Contact Name: Brian Hailey	Title: Director of Transportation		
Address: 1501 N Ash Street, Owasso, OK., 74055-4	920		
Email Address: brian.hailey@owassops.org			

Attachment D

INTEREST AFFIDAVIT

The following affidavit is to accompany the proposal:

STATE OF: Non Je COUNTY OF: Morris , Of lawful age, being first duly sworn, states that s(he) is the agent authorized by the bidder to submit the attached proposal. Affiant further states that no officer or employee of the City of Broken Arrow either directly or indirectly, owns a twenty-five percent (25%) interest in the bidder's business or such a percentage, which constitutes a controlling interest. Affiant furthers states that the following officers and/or employees of the City of Broken Arrow have some direct or indirect interest in the bidder's business: YPS For purposes of this affidavit, a direct or indirect interest is defined to include any relationship existing on the date of this affidavit, or which previously existed within the past year. Such an interest shall also be defined to include any business relationship between or among the proposed parties to the contract project and also to include any business relationship between the officers and directors of the proposed contracting parties of the project. Subscribed and Sworn to before me this _____ day of _____ 20 74 My Commission Expires: 12/01/2026 Notary Public JUNGKIL HAN ID # 2353073 NOTARY PUBLIC

STATE OF NEW JERSEY My Commission Expires December 1, 2026

Attachment E

PROPOSAL AFFIDAVIT

The following affidavit is to accompany the proposal:

STATE OF: New Jersey COUNTY OF: Morris

<u>Giuliana Kafaf</u>, of lawful age, being first duly sworn, on oath says: 1. (S)he is the duly authorized agent of <u>Offen Permitting ULC</u>, the proposer submitting the competitive offer which is attached to this statement, for the purpose of certifying the facts pertaining to the existence of collusion among proposer and between proposer and city officials or employees, as well as facts to pertaining to the giving or offering of things of value to government personnel in return for special consideration in the letting of any contract pursuant to the offer to which this statement is attached; 2. (S)he is fully aware of the facts and circumstances surrounding the making of the offer to which this statement is attached and has been personally and directly involved in the proceeding leading to the submission of such proposal; and 3. neither the proposer nor anyone subject to the proposer's direction or control has been a party: a). to any collusion among proposers in restraint of freedom of competition by agreement to submit an offer at a fixed price or to refrain from submitting an offer, b). to any collusion with any city official or employee as to quantity, quality, or price in the prospective contract, or as to any other terms of such prospective contract, nor c). in any discussions between proposers and any city official concerning exchange of money or other things of value for special consideration in the letting of a contract.

× Muliana Kafaf

Subscribed and sworn to before me this day of day of
My Commission Expires: 12/01/2016
Notary Public (or Clerk or Judge)
JUNGKIL HAN ID # 2353073 NOTARY PUBLIC STATE OF NEW JERSEY My Commission Expires December 1, 2026

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

Befor	e you begin. For guidance related to the purpose of Form W-9, see Purpose of Form, below.				
	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) Offen Petroleum LLC				
Print or type. See Specific Instructions on page 3.	2 Business name/disregarded entity name, if different from above.				
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. Individual/sole proprietor C corporation S corporation Partnership Trust/estate	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):			
	 LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership)	Exempt payee code (if any) Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any)			
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions	(Applies to accounts maintained outside the United States.)			
	5 Address (number, street, and apt. or suite no.). See instructions. Requester's name a	nd address (optional)			
	5100 E 78th Ave				
	6 City, state, and ZIP code				
	Commerce City, CO 80022	ile "			
	7 List account number(s) here (optional)				
Par	Taxpayer Identification Number (TIN)				
Entor	your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid Social sec	urity number			

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- 2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- 3. I am a U.S. citizen or other U.S. person (defined below); and
- 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person	Aux	A.	er	
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/FormW9*.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification. New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

or

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Date 04/01/2024

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Employer identification number

1 1 0 1

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

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