Return to:

Name of individual sending

Individual email address

Contractor: \_\_\_\_\_\_\_\_\_\_\_\_\_

Address 1 \_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Postal \_\_\_\_\_\_\_\_\_\_\_\_\_

Contractor’s SOV Contract Number: \_\_\_\_\_\_\_\_\_\_\_\_\_

Contract Subject Matter: \_\_\_\_\_\_\_\_\_\_\_\_\_

This communication is sent to your company as you currently hold the State of Vermont (SOV) Contract referenced above.  On March 3, 2022, Governor Phil Scott issued Executive Order No. 02-22, which in part requires a review of all contracts for Russian-sourced goods and goods produced by Russian entities. The Executive Order can be found here: <https://governor.vermont.gov/content/executive-order-02-22-solidarity-ukrainian-people>

The State is required to secure your response to this certification request. You should (1) either check Box A below, or check Box B and complete the associated table accordingly, and (2) sign below certifying that the form is accurate on behalf of your organization with respect to whether Russian-sourced goods and goods produced by Russian entities are being provided to the State of Vermont under the Contract.

Response to this letter must be submitted on or before XXX, 2022 by email to the SOV “Return to” contact stated above. If convenient for you, an electronic version of the template used for this letter is available at the web address link [Forms | Buildings and General Services (vermont.gov)](https://bgs.vermont.gov/purchasing-contracting/forms) above.

1. Contractor hereby certifies that in connection with the Contract, **none** of the applicable goods are Russian-sourced goods and/or produced by Russian entities.
2. If the non-use box is not checked in Section A above, Contractor hereby indicates that certain products provided under this contract with the State of Vermont are Russian-sourced goods and/or produced by Russian entities, as described in the table below.

In addition, identify where indicated in the table, which goods are Russian-sourced and/or produced by Russian entities. An additional column is provided for any note or comment that you may have.

|  |  |  |
| --- | --- | --- |
| **SOV**  **Contract #** | **Provided**  **Equipment, Product or Goods** | **Contractor Note or Comment** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Identify the point of contact for your company, along with their email address and phone number who the State can reach out to with follow-up questions or information associated with Executive Order No. 02-22.

Contact Name:

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_

The person signing this form states that the person is authorized to sign on behalf of the Contractor, and that upon reasonable inquiry and investigation, the certification and information provided above is true and correct for the Contractor and for its vendors whose products are being used to support performance of the Contract.

**Contractor Name:**

**By:**

# Name:

**Title:**

**Date:**