

**ATTACHMENT 7 – COMPANY BACKGROUND**

Complete one form for each vendor included in the proposal.

Company Information							
Type of Company:	Parent:		Subsidiary:		Division:		
Company Name:							
Address 1:							
Address 2:							
City		State/Prov.		Zip/Postal		Country:	

Telephone:		Fax:		Website:	
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Type of Ownership (Place X in all relevant boxes):					
Public:		Private:		Family Owned:	
Not-For-Profit:		Employee Owned:		Foreign Owned:	

Parent Company Information							
Company Name:							
Address 1:							
Address 2:							
City		State/Prov.		Zip/Postal		Country:	

Telephone:		Fax:		Website:	
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Closest Office To Potential Opportunity							
Company Name:							
Address 1:							
Address 2:							
City		State/Prov.		Zip/Postal		Country:	

Telephone:		Fax:		Website:	
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Company Background							
Year Est.:		State/Prov. Inc.:		Country Inc.:		Tax ID:	
Number Employees – Parent:				Number Employees – Subsidiary:			
2019 Revenue:			2020 Revenue:			2021 Revenue:	
Merger History (If Applicable) – Attach additional information to this form.							
Merger 1:				Year:			
Merger 2:				Year:			
Merger 3:				Year:			
Merger 4:				Year:			

<b>Market Sectors Served (Place X in all relevant boxes):</b>					
Public Sector:		Manufacturing:		Commercial:	
<b>Public Sector Clients Served (Place X in all relevant boxes):</b>					
Federal:		State:		Local:	
University:		K-12:		Public Utility:	
Special Districts:		Other:		Please Specify	

<b>Company Experience</b>			
Years Implementing Solution:		Years Implementing in School Districts:	
No. of School District Customers:		No. Customers Similar To This Opportunity:	
<b>Provide Brief Description of Experience:</b>			