**ETF0060 – Annual Audit of the Wisconsin Deferred Compensation Program financial statements and notes**

Instructions: Review and check each box listed below, sign and date, and submit per RFP section 2.

|  |  |  |
| --- | --- | --- |
| **Appendix 1:** Proposer Checklist (this form) |  | Completed and signed |
| **Appendix 2:** Proposer Required Form |  | Completed and signed |
| **Appendix 3:** Subcontractor Information |  | Completed |
| **Appendix 4:** Mandatory Proposer Qualifications |  | Completed and signed |
| **Appendix 5:** Audit Requirements |  | Read and understood |
| **Appendix 6:** General and Technical Questions (followed by requested documents including, auditor’s resumes, example financial statements audit report, **2 Client Reference Forms** completed and signed) |  | Responses provided in blue highlighted rows and documents provided. |
| **Appendix 7:** Assumptions and Exceptions |  | Completed |
| **Appendix 8:** Department Terms and Conditions |  | Read and understood |
| **Appendix 9:** Pro Forma Contract (example) |  | Read and understood |
| **Appendix 10:** Cost Proposal |  | Completed all tabs |
| **Current W-9** (use online IRS Form) |  | Completed and signed |

**Proposer Information:**

|  |  |
| --- | --- |
| Proposer Company Name: | Click or tap here to enter text. |
| Name & Title of Authorized Representative: | Click or tap here to enter text. |
| Authorized Representative Signature: |  |
| Signature Date: | Click or tap here to enter text. |