WITH input from stakeholders, the Division of Developmental Disabilities has amended RFQVA # DDD 710000. To maintain a Qualified Vendor Agreement (QVA) with the Division, each Qualified Vendor must amend its Qualified Vendor Agreement.

In order to amend the Qualified Vendor Agreement, the Division requires the Qualified Vendor to submit the following documents: (i) the RFQVA Amendment; (ii) printed electronic Assurances and Submittals including any required supporting documents; and (iii) Data Sharing Agreement. All three (3) documents must be completed, signed and submitted to the Division’s Contracts Management Unit no later than September 1, 2014 for signature by the Contract Administrator. In order to ensure continued service delivery, the Division is requesting receipt of the documents no later than 5:00 p.m. M.S.T. on August 20, 2014.

In the event a Qualified Vendor fails to have an approved Amendment by September 1, 2014, the Division will pursue contractual remedies, up to and including termination of the Qualified Vendor Agreement.

The process for completing each of the requirement Amendment documents is identified below:

1. RFQVA Amendment
   a. Signatory completes the left column of page seven (7) of the Amendment, leave the right column blank, this will be completed by the Division.
   b. Sign and date the “Acknowledgement of the RFQVA Amendment”.
   c. Print the name and the title of authorized signatory signing the Amendment
   d. Print the full legal agency name as it appears on the QVA and W-9
   e. List the agency’s Federal Employer Identification Number (FEI or tax I.D.)
   f. List the six (6) digit contract number. The number may be found at top left corner of the printed Assurances and Submittals document.

2. Assurances and Submittals
   a. Log into the Qualified Vendor Application and Directory System (QVADS) account
   b. Access Section 3: Assurances and Submittals
   c. Complete and answer ALL questions
   d. Print the completed document
   e. Sign and date the document. Signature must be made by an authorized signatory.
   f. Attach any supporting documentation, as required, based on the responses.
3. **Data Sharing Agreement**
   b. Complete the Data Sharing Agreement
   c. Use the agency full legal name as it appears on the W-9 and QVA
   d. Print document
   e. Sign and date the document by an authorized signatory
   f. Email any questions regarding the Data Sharing Agreement to [DDDSecurity@azdes.gov](mailto:DDDSecurity@azdes.gov)

4. Send all three documents, via U.S. Postal Office mail to:

   Contracts Management Section  
   Business Operations – Site Code 791 A  
   Arizona Department of Economic Security  
   Division of Developmental Disabilities  
   P.O. Box 6123  
   Phoenix, AZ  85005

   Or hand-deliver to:

   Contracts Management Section  
   Business Operations – Site Code 791 A  
   Arizona Department of Economic Security  
   Division of Developmental Disabilities  
   1789 W Jefferson, 4th Floor, Southwest Corner  
   Phoenix, AZ  85007

   **Please request a signed receipt for any documents that are hand delivered.**  
   **Scanned, fax or emailed documents will not be accepted.**