



STATE OF OHIO  
DEPARTMENT OF ADMINISTRATIVE SERVICES  
GENERAL SERVICES DIVISION  
OFFICE OF PROCUREMENT SERVICES  
4200 SURFACE ROAD, COLUMBUS, OH 43228-1395

**MANDATORY USE CONTRACT FOR: Tobacco Use Prevention and Cessation Chronic Disease Communication Campaign**

CONTRACT NUMBER: CSP904411

EFFECTIVE DATES: 5/31/11 TO 6/30/11  
Renewal through 3/28/12

The Department of Administrative Services has accepted Proposals submitted in response to Request for Proposal (RFP) No. CSP904411 that opened on March 11, 2011. The evaluation of the Proposal responses has been completed. The Offeror listed herein has been determined to be the highest ranking Offeror and has been awarded a Contract for the services listed. The respective Proposal response including, Contract Terms & Conditions, any Proposal amendment, special Contract Terms & Conditions, specifications, pricing schedules and any attachments incorporated by reference and accepted by DAS become a part of this Services Contract.

The agency listed herein is eligible to make purchases of the contracted services in any amount and at any time as determined by the agency. The State makes no representation or guarantee that department will purchase the volume of services as advertised in the Request for Proposal.

This Requirements Contract is effective beginning and ending on the dates noted above unless, prior to the expiration date, the Contract is renewed, terminated, or cancelled in accordance with the Contract Terms and Conditions.

This Requirements Contract is available to the Ohio Department of Health as applicable.

Questions regarding this and/or the Services Contract may be directed to:

Ross Leider, CPPB  
ross.leider@das.state.oh.us

This Requirements Contract and any Amendments thereto are available from the DAS Web site at the following address:



<http://www.ohio.gov/procure>

COST SUMMARY FORM

Tobacco Use Prevention and Cessation Chronic Disease Communication Campaign  
 CSP903411

UNSPSC CATEGORY CODE(S): 80000000, 93131701, 60105600

BUDGET: \$50,000.00

INSTRUCTIONS:

The Offeror must complete the form below and submit a detailed line item budget with an additional narrative for entire Work as identified in Attachment One, Part One (Scope of Work and Deliverables) on page 16.

OAKS ID Number: 19234

Description	Cost for Project Period Date of award – June 30, 2011
1. Produce a plan outlining the process/action steps and timeline needed to facilitate, develop and produce an acceptable comprehensive communication plan which explains the connection between tobacco use and chronic disease(s).	\$ 3,000
2. The successful Offeror shall develop collateral materials to support the communication plan and allow for public education and marketing on the role and risks of tobacco use with chronic disease(s).	\$ 10,500
3. Provide a minimum of 5 focus groups for a cross cultural population to test print materials and key messages.	\$ 25,000
4. Identify target audiences to be addressed by the communication plan and provide a dissemination plan to reach each target audience.	\$ 1,500
5. The successful Offeror shall correspond with TUPCP staff on a weekly basis in regards to assignments and related progress through emails and meet with TUPCP staff on a bi-weekly basis. Produce a written report summarizing the outcomes of the facilitated discussion/planning session and progress status with ODH staff.	\$ 3,000
6. The successful Offeror shall deliver to ODH an acceptable final comprehensive communication plan which explains the connection between tobacco use and chronic disease(s) by June 30, 2011.	\$ 2,000
7. The successful Offeror shall provide an acceptable final report on the findings of the focus groups by June 30, 2011.	\$ 3,500
8. Provide TUPCP staff support by responding to phone and e-mail inquiries within a 24 hour time frame.	\$ 500
<b>TOTAL NOT TO EXCEED:</b>	\$ 49,000

CONTRACTOR INDEX

CONTRACTOR AND TERMS:

CONTRACT NO: CSP904411-1 (03/28/11)

159306  
Fleishman-Hillard Cleveland  
1350 Euclid Avenue  
Suite 200  
Cleveland, OH 44115

TERMS: Net 30 Days

Remit to Address:  
Fleishman-Hillard Cleveland

Wire Information:  
Bank of America  
540 W. Madison Street  
Chicago, IL 60661  
800-699-7188 x86221  
Account Name: Fleishman-Hillard, Inc.  
Account Number: 5800393273  
ABA: 026009593  
ACH: 071000039  
Swift Code: BOFAUD3N  
Remit Email: [julieann.maness@fleishman.com](mailto:julieann.maness@fleishman.com)

Lockbox Information:  
Fleishman-Hillard Inc.  
P.O. Box 598  
St. Louis, MO 63188-0598

CONTRACTOR'S CONTACT: Michael Murphy

Telephone (216) 928-3485  
Fax (216) 928-3443  
Email [Michael.murphy@fleishman.com](mailto:Michael.murphy@fleishman.com)

SUMMARY OF ADMENDMENTS

ADMENDMENT NUMBER	REVISION DATE	DESCRIPTION
1	6/02/11	Renew Contract from 7/1/11 through 3/28/12