

Texas Water **Development Board**

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TEXAS WATER DEVELOPMENT BOARD

Work Flow Solution Project

Statement of Work (SOW) # 580150930

CLOSING DATE: 10/22/2014

CLOSING TIME: 2:00 PM CST

DBITS- Application Development

Class-Item Codes: 920-07

**Texas Water Development Board
DIR DBITS #580150930 for
Work Flow Solution Project**

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Section I – Overview

1. INTRODUCTION

The Texas Water Development Board's (TWDB) mission is to provide leadership, information, education, and support for planning, financial assistance, and outreach for the conservation and responsible development of water for Texas. Our mission is a vital part of Texas' overall vision and its mission and goals which relate to maintaining the viability of the state's natural resources, health and economic development. To accomplish its goals of planning for the state's water resources and for providing affordable water and wastewater services, the TWDB provides water planning, data collection and dissemination, financial assistance and technical assistance services to the citizens of Texas. The tremendous population growth that the state has and will continue to experience, and the continual threat of severe drought, only intensify the need for the TWDB to accomplish its goals in an effective and efficient manner.

To meet the ever increasing demand on services, TWDB seeks a way to optimize processes through the use of automation. This Statement of Work (SOW) will outline three areas that we have targeted for process improvement.

2. BACKGROUND

There are several internal processes that TWDB wishes to implement over the next several years. This SOW is planned for developing the infrastructure, delivering the initial processes and transitioning responsibility to the TWDB. All documentation and developed products are the ownership of the TWDB.

The requirements listed outline the high level areas the TWDB seeks to automate. Respondents are requested to provide innovative, scalable solutions that can be easily modified and maintained by TWDB staff. The proposed solution must be developed using Microsoft SharePoint 2013.

3. CONTRACT TERM

The services requested shall be provided upon issuance of the Purchase Order through accepted Project Delivery.

Any extensions, if exercised, shall be executed in the form of a Purchase Order Change Notice (POCN) issued by TWDB no sooner than ninety (90) days prior to the expiration date of the initial contract, or no later than the final day of the contract period.

The award and renewal(s) of the purchase are contingent upon the availability of funds.

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Section II – Scope of Services

DESCRIPTION OF SERVICES

General Requirements:

- Provide appropriate security authentication and authorization support
- Provide access via a browser internally and externally
- Provide administrative capabilities to manage the application(s)

Process 1: Collaborative Document Process. There are agency documents created and then shared and reviewed for edits and approvals. This process would allow for collaboration and sharing of documents with an associated work flow process.

Requirements

- Provide the ability for multiple people to work on a single document
- Provide the ability to track changes and updates to the document version
- Provide a customizable workflow process based on document type that advises of action required and subsequent approval of the final version
- Provide for notifications when approvals are required
- Provide for approval rights and user roles
- Allow for approvals by role and modifications to routing process
- Provide reminder notices for past due and escalation
- Provide reports and a dashboard summary of document flows

Process 2: Automate Agency Forms. The following are initial delivery of agency forms:

- | | |
|--|-----|
| • Expenditure Requests (ERs) | D-1 |
| • Performance and Appraisal | D-2 |
| • Personnel Actions (PAs) | D-3 |
| • Employee System Access Request (ESAR) | D-4 |
| • Outside Employment Activity Notification For | D-5 |
| • Job Posting Request Form | D-6 |
| • Travel Authorization Form | D-7 |
| • Travel Voucher | D-8 |
| • Introductory Period Evaluation For | D-9 |

Sample forms are provided in Attachment D

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Requirements:

- Provide an automated version of the form
- Provide for data entry into required fields
- Provide for standard edits and drop down menus
- Provide a customizable workflow process based on document type that advises of action required and subsequent approval of the final version
- Provide for notifications when approvals are required
- Provide for approval rights and user roles
- Allow for approvals by role and modifications to routing process
- Provide reminder notices for past due and escalation
- Provide reports and a dashboard summary of document flows

Process 3: Document Scanning and Contact Management. Documents are received at the agency that requires routing for review and response. The contact information of the person that submitted the document is captured and stored in the application.

Requirements:

- Provide the ability to scan incoming mail correspondence and append to a work flow process that assigns responsibility
- Provide the ability to capture other input channels, such as email, and append to a work flow process that assigns responsibility
- Provide the ability to capture contact information from correspondence
- Provide a customizable workflow process based on document type that advises of action required and subsequent approval of the final version
- Provide reminder notices for past due and escalation
- Provide reports and a dashboard summary of document flows

Technical Infrastructure and Environment: The following are the standard requirements.

The application will be hosted by the TWDB and shall meet the following technical requirements:

- The system will be deployed to the agency's cloud server and will conform to that server's operating system of Microsoft Windows 2008 R2.
- The system database will be developed using the Microsoft SQL Server 2012 platform.
- The system components developed will be coded using C# and Version 4.0/4.5 of the .NET framework. The development environment will be Visual Studio 2012 or later.
- The system will be developed using Microsoft SharePoint 2013.
- Coding of the system will conform to agency standards and best practices.

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- System reporting will be developed using Microsoft SQL Server 2012 Reporting Services.
- The system must be designed to be compatible with Microsoft Internet Explorer 9 at a minimum.
- The TWDB will own the code to the system and will have the ability to maintain and enhance the completed system as necessary after initial development.
- Sufficient training will be provided to internal TWDB Information Technology staff to allow for agency maintenance and enhancements to the developed system.
- The system will be properly documented, including, but not limited to, the development of application flow diagrams and system run books.
- The system must be compliant with state and federal accessibility requirements.
- The system must be compliant with TWDB security policy and requirements.

Software Development Life Cycle: The vendor should propose the approach to project delivery. The TWDB will review and approve documentation listed in Section III Deliverables.

Section III – Deliverables

Project Deliverables

Deliverables for this project include a workflow solution with associated supporting software that is compatible with TWDB's existing platforms. At a minimum, respondents will address the following:

1. Kick-Off Meeting. This deliverable will be the project kick-off Meeting with the selected Contractor. Expectations are to outline schedules and activities for the project.
2. Project Schedule. This deliverable is a fully tasked and resource loaded MS-Project Schedule. TWDB Project Manager (PM) will work with Contractors Project Manager (CPM) to load applicable TWDB tasks and resources.
3. Requirements document(s). This deliverable will define business and system requirements from description of services.
4. Design specifications. This deliverable will be the applicable Functional and Technical Design.
5. Code Review. This deliverable will be the vendor providing code reviews with TWDB technical staff including conformance to published standards. The completion of this deliverable will be a checklist of applicable code bases.

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6. **System Test Results.** This deliverable will be a matrix or similar artifact that illustrates the functionality tested and traceability to requirements.
7. **User Test Results.** The vendor will support TWDB user testing activities. Completion will be based upon all user testing completed and approval to implement.
8. **System documentation.** This deliverable will be technical documentation of the application.
9. **User Guide.** This deliverable will be functional documentation of the application.
10. **Training.** This deliverable will consist of knowledge transfer to TWDB staff and include separate activities for technical and functional. Basis of content should be the system documentation and user guide.
11. **Completed Application(s).**
12. **Project Close-Out.** This deliverable will include completion of any known defects, transfer of all documentation, and full acceptance of project completion.

Deliverable Acceptance Process

Content and dates will be developed with the selected Contractor in accordance with the following:

- Deliverables must be provided by the dates specified. Any changes to the delivery date must have prior approval (in writing) by the TWDB CM or designate.
- All deliverables must be submitted in a format approved by the TWDB CM.
- All deliverables must have acceptance criteria established and a time period for testing or acceptance.
- If the deliverable cannot be provided within the scheduled time frame, the Contractor is required to contact the TWDB CM in writing (email is acceptable) with a reason for the delay and the proposed revised schedule. The request for a revised schedule must include the impact on related tasks and the overall project.
- A request for a revised schedule must be reviewed and approved by the TWDB CM before placed in effect.
- The TWDB will complete a review of each submitted deliverable within specified working days for the date of receipt.

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Section IV – General Information

1. Key staff

The TWDB will provide the following key positions to support the Project:

Role	Responsibility
Project Manager (PM)	Coordinating all project tasks and assignments with Contractors PM. The Project Manager will be the primary point of contact.
Contract Manager (CM)	Responsible for managing the contract side of the project including invoice processing and compliance.
Business Lead	Responsible for review and approval of deliverables related to application functionality.
Subject Matter Expert(s)	Responsible for development of all requirements and input into design process.
Systems Architect and Technical Architect	Responsible for review and approval of deliverables related to application technical components.
User Acceptance Testers	TWDB business users that will develop scenarios to test application functionality.

2. Facility

The TWDB will provide workspace and workstations for Contractor's staff. The TWDB will provide meeting space for work sessions and status meetings.

Any meetings, conference calls or WebEx sessions will be held on regular business days during regular business hours upon mutually agreed dates and times. M-F, 8-5 CST

3. Software and Hardware

The TWDB will provide all hardware and software. All development will be conducted on TWDB servers.

4. Scope Management

This SOW defines base level required functionality. These components will be further elaborated through requirements definition and design. TWDB will work closely with the Contractor to ensure project scope remains within the SOW framework. Changes required or identified outside of this framework will be handled through change control process.

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5. Reporting

Content and dates will be developed with the selected Contractor in accordance with the following:

- The Contractor is required to provide the TWDB CM with weekly written progress reports of this project. These are due to the TWDB CM by the close of business every Monday throughout the life of the project.
- The progress reports shall cover all work performed and completed during the prior week for which the progress report is provided and shall present the work to be performed during the subsequent week.
- The progress report shall identify any problems encountered or still outstanding with an explanation of the cause and resolution of the problem or how the problem will be resolved.
- The Contractor will be responsible for conducting weekly status meetings with the Customer contract manager. The meetings will be held every Monday at a time and place so designated by the Customer contract manager - unless revised by the Customer contract manager. The meetings can be in person or over the phone at the discretion of the Customer contract manager.

6. Timeline:

Recommended Timeline. The Contractor shall propose a reasonable timeline for delivery. Dates will be negotiated with selected Contractor during the contracting process.

7. Solution Response:

The sequence and priority of the delivery is Process 1, Process 2 and Process 3. TWDB requests a price for each Process separately. During review of the responses, TWDB will determine the feasibility of a more compressed timeline and parallel delivery. It is requested that the vendor provide any recommendations for ways to deliver the products more efficiently and in a cost savings manner.

8. Compensation- Provided by respondent Fee schedule, services, and qualifications. The compensation for the application is a fixed priced delivery. TWDB may seek additional services from the selected vendor beyond the initial delivery. Please provide hourly rates for positions in your response. **NOTE:** Please include in Exhibit B.

9. Schedule of Events

The solicitation process for this SOW will proceed according to the following schedule:

Issue SOW	October 1, 2014
Q&A due from Vendors	October 10, 2014
Answer due from TWDB	October 17, 2014
Deadline for Submission of SOW	October 22, 2014
Expected Date of Award	November 10, 2014
Expected Contract Start Date	December 1, 2014

NOTE: TWDB reserves the right to change the dates in the schedule of events above.

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10. Submission of SOW

Submissions: Respondents shall submit:

ORIGINAL: Submit one (1) complete original response (marked Original) which shall include the solicitation document and all pricing schedules.

COPIES: Submit four (4) unbound copies which shall **NOT** include any pricing for the evaluation committee's review.

ELECTRONIC Version: One complete version on CD or USB.

Submission pages should be numbered and contain an organized, paginated table of contents corresponding to the section and pages of SOW.

- Be on single sided 8½ x 11-inch paper and may be tab indexed.
- Be delivered to the address noted in this solicitation.
- Be clearly marked "RESPONSE TO 580150930".
- Be complete and comprehensive.

Deliver on 10/22/2014 prior to 2:00 PM (CST) at 1700 North Congress 6th Floor.

Provide information in the following order:

Section 1 – Priced signed and dated SOW

Section 2 – Company Profile Summary and History – Company name, address, and phone number, legal status (corporation, partnership, joint venture, sole proprietorship) Two (2) pages maximum.

Name, phone number, and email address of person TWDB should contact with any questions on the offer.

Name and title of person submitting offer with the authority to bind the company.

Describe the general nature of previous work, the number of years in business, size and scope of operation. (Maximum 25 double-sided pages)

Schedule 1 – A resume shall be submitted clearly showing how each individual meets the qualifications of this specification.

Section 3 – Company References: Respondent shall provide references from a minimum of three customers to whom the respondent has provided services in the past 36 months similar to the scope of services described in this specification.

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Attachment A - Execution of Offer

Attachment B - Services and Fees: Provide a compensation schedule for the services to be performed in response to this SOW. The fee shall include, but is not limited to on-site meetings, emails, telephone calls, any and all materials, copying or advertising expenses, travel and/or parking expenses, etc. (Attachment B)

Note: Costs: Respondents are responsible for all costs in the preparation and delivery of this SOW to TWDB.

TWDB will not be responsible for locating or securing information that is not included in the request.

The following attachments meet the minimum requirements the program will evaluate. Respondents are advised to provide the attached pages or a reasonable facsimile with the response. Failure to return the documents or a facsimile will result in the response being considered non-responsive, and may be disqualified.

Copyrights: TWDB will not consider any SOW that bears a copyright. SOW will be subject to the Texas Public Information Act, Texas Government Code, Chapter 552, and may be disclosed to the public upon request. Subject to the Act, Respondents may protect trade and confidential information from public release. Trade secrets or other confidential information, submitted as part of a SOW, shall be clearly marked at each page it appears. Such marking shall be in boldface type at least 14 point font.

11. INQUIRIES

(A) All inquiries shall be submitted in writing to the Attention of :

Contract Administration referencing SOW- 580150930
Contracts@twdb.texas.gov

(B) Except as otherwise provided in this Section, upon issuance of this SOW, other employees and representatives of TWDB will not answer questions or otherwise discuss the contents of the SOW with any potential Respondent or its representatives. Failure to observe this restriction may result in disqualification of any subsequent SOW. This restriction does not preclude discussions unrelated to this SOW.

12. SUBMISSION

(A) All submissions shall be received and date stamped at TWDB on or prior to the date specified in the Schedule of Events above. TWDB will not accept late submittals.

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(B) Submission should be placed in a separate envelope or package and correctly identified with the SOW number and submittal deadline/SOW opening date and time. It is Respondent's responsibility to appropriately mark and deliver the SOW to TWDB by the specified date.

(C) Receipt of all addenda, if applicable, to this SOW should be acknowledged by returning a signed copy of each addendum with the submitted SOW

13. DELIVERY OF SUBMISSION

SOW may be submitted to TWDB by one of the following methods:

U.S. Postal Service, Overnight/Express Mail or
Hand Delivered to:

Texas Water Development Board
Purchasing
P.O. Box 13231
Austin, TX 78711-3231

Or

1700 North Congress Avenue
Austin, TX 78701
Hours – 8:00 to 5:00

14. SOW CLOSING

SOW will be opened at 1700 North Congress, Austin, Texas.78701

(A) All responses become the property of TWDB after the submittal deadline/opening date.

(B) Responses submitted shall constitute an offer for a period of ninety (90) days or until selection is made by TWDB, whichever occurs earlier.

15. EVALUATION AND AWARD

TWDB will evaluate and award a contract to the Respondent who has demonstrated:

- A. 30% - Experience with requested services
- B. 40% - Quality of response to requested services
- C. 30% - Price

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Section V – General Terms and Conditions

1. Any Contract awarded as a result of this SOW will contain the general terms and conditions provided in this document. Subcontractors are also obliged to comply.

2. The Contract shall be governed, construed and interpreted under the laws of the State of Texas. The factors listed in Texas Government Code, Title 10, Subtitle D, Section 2155.074, 2155.144, 2156.007, 2157.003 shall also be considered in making an award when specified. Any legal actions must be filed in Travis County, Texas.

3. PATENTS OR COPYRIGHTS.

The Contractor agrees to protect the State of Texas and TWDB from claims involving Infringement of patents or copyrights.

4. CONTRACTOR ASSIGNMENTS.

Contractor hereby assigns to TWDB any and all claims for overcharges associated with this contract arising under the antitrust laws of the United States 15 U.S.C.A. Section 1, et seq. (1973), and the antitrust laws of the State of Texas, TEX. Bus. & Comm. Code Ann. Sec. 15.01, et seq. (1967).

5. RESPONDENT'S AFFIRMATION.

Signing this SOW (Attachment A – Execution of Offer) with a false statement is a material breach of contract and shall void the submitted offer or any resulting contracts, and the respondent shall be suspended from all bid lists. By signature, hereon affixed on Attachment A, the respondent hereby certifies the following:

(A) The respondent has not given, offered to give, nor intends to give at any time hereafter any economic opportunity, future employment, gift, loan, gratuity, special discount, trip, favor, or service to a public servant in connection with the submitted bid.

(B) Neither the respondent nor the firm, corporation, partnership, or institution represented by the respondent, or anyone acting for such firm, corporation or institution has violated the antitrust laws of this State or the Federal Antitrust Laws, nor communicated directly or indirectly the SOW made to any competitor or any other person engaged in such line of business.

(C) Pursuant to Section 2155.004, Government Code, the respondent has not received compensation for participation in the preparation of the specifications for this SOW.

(D) Pursuant to Section 231.006 (d), Family Code, re: child support, the respondent certifies that the individual or business entity named in this bid is not ineligible to receive the specified payment and acknowledges that this contract may be terminated and payment may be withheld if this certification is inaccurate.

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(E) Under Section 2155.004 Government Code, the respondent certifies that the individual or business entity named in this SOW or contract is not ineligible to receive the specified contract and acknowledges that this contract may be terminated and payment withheld if this certification is inaccurate.

(F) The Contractor shall defend, indemnify, and hold harmless the State of Texas, all of its officers, agents and employees from and against all claims, actions, suits, demands, proceedings, costs, damages, and liabilities, arising out of, connected with, or resulting from any acts or omissions of contractor or any agent, employee, subcontractor, or supplier of contractor in the execution or performance of this contract.

(G) Respondent agrees that any payments due under this contract will be applied towards any debt, including but not limited to delinquent taxes and child support that is owed to the State of Texas.

(H) Respondent certifies that they are in compliance with section 669.003 of the Government Code, relating to contracting with executive head of a State agency. If section 669.003 applies, respondent will complete the following information in order for the bid to be evaluated:

Name of Former Executive: _____
Name of State Agency: _____
Date of Separation from State Agency: _____
Position with Respondent: _____
Date of Employment with Respondent: _____

(I) Respondent agrees to comply with Government Code 2155.4441, pertaining to service contract use of products produced in the State of Texas.

(J) Contractor understands that acceptance of funds under this contract acts as acceptance of the authority of the State Auditor's Office, or any successor agency, to conduct an audit or investigation in connection with those funds. Contractor further agrees to cooperate fully with the State Auditor's Office or its successor in the conducting of the audit or investigation, including providing all records requested. Contractor will ensure that this clause concerning the authority to audit funds received indirectly by subcontractors through Contractor and the requirement to cooperate is included in any subcontract it awards.

6. The TWDB is federally mandated to adhere to the directions provided in the President's Executive Order (EO) 13224, Executive Order on Terrorist Financing – Blocking Property and Prohibiting Transactions with Persons Who Commit, Threaten to Commit, or Support Terrorism, effective 9/24/2001 and any subsequent changes made to it via cross-referencing respondents/Contractors with the Federal General Services Administration's Excluded Parties List System (EPLS, <http://www.epls.gov>), which is inclusive of the United States Treasury's Office of Foreign Assets Control (OFAC) Specially Designated National (SDN) list.

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7. Pursuant to Section 231.006 (c), Family Code, bid must include Names and Social Security Numbers of each person with at least 25% ownership of the business entity submitting the bid. Enter Name & Social Security Numbers for each person. This information must be provided prior to contract award.

Name

Social Security Number:

Name:

Social Security Number:

Name:

Social Security Number:

8. Any terms and conditions attached to the SOW will not be considered unless specifically referred to on this SOW and may result in disqualification of the SOW.

9. The dispute resolution process provided for in Chapter 2260 of the Texas Government Code must be used by the TWDB and the Contractor to attempt to resolve all disputes arising under this contract.

10. NON-APPROPRIATION OF FUNDS. The State's funds are contingent on the availability of lawful appropriations by the Texas Legislature. If the Texas Legislature fails to continue funding for the payments due under an order referencing this Contract, the order will terminate as of the date that the funding expires, and the State will have no further obligation to make any payments.

11. Information, documentation, and other material in connection with this solicitation or any resulting contract may be subject to public disclosure pursuant to Chapter 552 of the Texas Government Code (the "Public Information Act"). Any part of the solicitation response that is of a confidential or proprietary nature must be clearly and prominently marked as such by the respondent.

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12. TECHNOLOGY ACCESS CLAUSE.

The Contractor expressly acknowledges that State funds may not be expended in connection with the purchase of an automated information system unless that system meets certain statutory requirements relating to accessibility by persons with visual impairments. Accordingly, the Contractor represents and warrants to the qualified ordering entity that the technology provided to the qualified ordering entity for purchase is capable, either by virtue of features included within the technology or because it is readily adaptable by use with other technology, of:

- a.) Providing equivalent access for effective use by both visual and non-visual means;
- b.) Presenting information, including prompts used for interactive communications, in formats intended for both visual and non-visual use; and
- c.) Being integrated into networks for obtaining, retrieving, and disseminating information used by individuals who are not blind or visually impaired.

For purposes of this clause, the phrase "equivalent access" means a substantially similar ability to communicate with or make use of the technology, either directly by features incorporated within the technology or by other reasonable means such as assistive devices or services that would constitute reasonable accommodations under the Federal Americans with Disabilities Act or similar state or federal laws. Examples of methods by which equivalent access may be provided include, but are not limited to, keyboard alternatives to mouse commands and other means of navigating graphical displays and customizable display appearance.

13. Any individual who interacts with public purchasers in any capacity is required to adhere to the guidelines established in 1 TAC Chapter 45. The rule outlines the ethical standards required of public purchasers, employees, and Contractors who interact with public purchasers in the conduct of state business.

14. Specifically, a TWDB employee may not have an interest in, or in any manner be connected with a contract or bid for a purchase of goods or services by an agency of the state; or in any manner, including by rebate or gift, accept or receive from a person to whom a contract may be awarded, directly or indirectly, anything of value or a promise, obligation, or contract for future reward or compensation. Entities who are interested in seeking business opportunities with the state must be mindful of these restrictions when interacting with public purchasers of TWDB or purchasers of other state agencies.

15. Respondents understand that the TWDB does not tolerate any type of fraud. The agency's policy is to promote consistent, legal, and ethical organizational behavior by assigning responsibilities and providing guidelines to enforce controls. Any violations of law, agency policies, or standards of ethical conduct will be investigated, and appropriate actions will be taken. Providers are expected to report any possible fraudulent or dishonest acts, waste, or abuse to the agency's Internal Audit Director at 512-463-7978.

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16. CONFLICT OF INTERESTS - An offer will not be selected if it has a conflict of interest that will or may arise during the performance of its obligations under the contract. For this reason, a response to this SOW must disclose all business interest and all relationships that could reasonably be considered to pose possible conflicts of interest in the offer's performance of contract obligations. In addition, offers must represent and warrant in its response to this SOW and in the contract that in the performance of services under the contract, (1) Respondent does not have and will not have any actual or potential conflict of interest, and (2) Respondent will take whatever reasonable actions may be necessary and prudent to avoid even the appearance of impropriety.

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SCHEDULE 1

RESUMES

Format to be determined by respondent

THIS PAGE OR A REASONABLE FACSIMILE SHALL BE RETURNED WITH THE RESPONSE. FAILURE TO RETURN THIS PAGE OR A REASONABLE FACSIMILE WILL RESULT IN THE RESPONSE BEING CONSIDERED NON-RESPONSIVE. ANY NEGATIVE RESPONSE(S) MAY RESULT IN DISQUALIFICATION OF THE RESPONSE.

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**SCHEDULE 2
PROFILE AND REFERENCES**

Respondent Name: _____

Reference #1

Name of Organization:			
Business Address:	推		
Business City:			
Business State:		Zip:	
Contact Person Name:			
Contact Person Title:			
Phone Number:			
Fax:			
Client Comments:			

THIS PAGE OR A REASONABLE FACSIMILE SHALL BE RETURNED WITH THE RESPONSE. FAILURE TO RETURN THIS PAGE OR A REASONABLE FACSIMILE WILL RESULT IN THE RESPONSE BEING CONSIDERED NON-RESPONSIVE. ANY NEGATIVE RESPONSE(S) MAY RESULT IN DISQUALIFICATION OF THE RESPONSE.

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SCHEDULE 2**

PROFILE AND REFERENCES – CONTINUED

Reference #2

Name of Organization:			
Business Address:			
Business City:			
Business State:		Zip:	
Contact Person Name:			
Contact Person Title:			
Phone Number:			
Fax:			
Client Comments:			

THIS PAGE OR A REASONABLE FACSIMILE SHALL BE RETURNED WITH THE RESPONSE. FAILURE TO RETURN THIS PAGE OR A REASONABLE FACSIMILE WILL RESULT IN THE RESPONSE BEING CONSIDERED NON-RESPONSIVE. ANY NEGATIVE RESPONSE(S) MAY RESULT IN DISQUALIFICATION OF THE RESPONSE.

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SCHEDULE 2**

PROFILE AND REFERENCES – CONTINUED

Reference #3

Name of Organization:			
Business Address:			
Business City			
Business State		Zip:	
Contact Person Name:			
Contact Person Title:			
Phone Number:			
Fax:			
Client Comments:			

THIS PAGE OR A REASONABLE FACSIMILE SHALL BE RETURNED WITH THE RESPONSE. FAILURE TO RETURN THIS PAGE OR A REASONABLE FACSIMILE WILL RESULT IN THE RESPONSE BEING CONSIDERED NON-RESPONSIVE. ANY NEGATIVE RESPONSE(S) MAY RESULT IN DISQUALIFICATION OF THE RESPONSE

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ATTACHMENT A

EXECUTION OF OFFER

Texas Water Development Board

Company Name: _____

VID/EFID No.: _____

Address: _____

I, _____ am the above-referenced company's representative and I am authorized to submit this Statement of Work and sign contract documentation.

Authorized Signature

Date

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Attachment B

**Proposed Services and Fee Schedule
(To be provided by Respondent)**

Pricing (Example)	Deliverable Name	Amount Process 1	Amount Process 2	Amount Process 3
Deliverable 1	Kick-Off Meeting			
Deliverable 2	Project Schedule			
Deliverable 3	Requirements Document(s)			
Deliverable 4	Design Specifications			
Deliverable 5	Code Reviews			
Deliverable 6	System Test Results			
Deliverable 7	User Test Results			
Deliverable 8	System Documentation			
Deliverable 9	User Guide			
Deliverable 10	Training			
Deliverable 11	On-Line Application			
Deliverable 12	Project Close-Out			
Total				
Additional Development Services				
Position	Rate			

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ATTACHMENT C

MINIMUM SUBMITTAL REQUIREMENTS
(Provided for informational purposes only)

RESPONDENT: _____

PARA. #	MINIMUM SUBMITTAL REQUIREMENTS	Yes	NO
	Submit an original with pricing. Submit signed and dated SOW #.		
	Submitted 4 copies without pricing		
	Submitted Resume's/ Company Profile, References and History Schedule 1 & 2,		
	Execution of Offer- Attachment A.		

The above was checked and verified by: _____

**Texas Water Development Board
DIR DBITS #580150930 for
Work Flow Solution Project**

**ATTACHMENT D
Forms**

Sample Form D-2



Employee Plan and Appraisal

Employee:	
State Classification Title/Working Title (If Applicable):	
Program Area:	
Division:	
Department (If Applicable):	
Section (If Applicable):	
Date Employed:	
Date Assigned in Present Position:	
Supervisor:	
Division Director:	
Deputy Executive Administrator:	
Select one of the following:	<input type="checkbox"/> Performance Appraisal <input type="checkbox"/> Performance Plan
Select one of the following:	<input type="checkbox"/> Annual <input type="checkbox"/> Introductory <input type="checkbox"/> Special <input type="checkbox"/> Transfer of Supervision
This document covers the period from _____ to _____ <small>MM/DD/YYYY MM/DD/YYYY</small>	

HR USE ONLY				
HR Received Date Stamp:	Approved Plan		Approved Appraisal	
	HR Generalist's Initials:	Date Approved:	HR Generalist's Initials:	Date Approved:
	HR Director's Initials:	Date Approved:	HR Director's Initials:	Date Approved:

Sample Form D-2

Brief Job Description:

Job Task Appraisal

Job Task:	
Performance Standard:	
Comments:	Appraisal Rating
 	<input type="checkbox"/> Exceeds Job Requirement <input type="checkbox"/> Meets Job Requirement <input type="checkbox"/> Needs Improvement
Job Task:	
Performance Standard:	
Comments:	Appraisal Rating
 	<input type="checkbox"/> Exceeds Job Requirement <input type="checkbox"/> Meets Job Requirement <input type="checkbox"/> Needs Improvement

Sample Form D-2

Job Task Appraisal (continued)

Job Task:	
Performance Standard:	
Comments:	Appraisal Rating
	<input type="checkbox"/> Exceeds Job Requirement <input type="checkbox"/> Meets Job Requirement <input type="checkbox"/> Needs Improvement
Job Task:	
Performance Standard:	
Comments:	Appraisal Rating
	<input type="checkbox"/> Exceeds Job Requirement <input type="checkbox"/> Meets Job Requirement <input type="checkbox"/> Needs Improvement
Job Task:	
Performance Standard:	
Comments:	Appraisal Rating
	<input type="checkbox"/> Exceeds Job Requirement <input type="checkbox"/> Meets Job Requirement <input type="checkbox"/> Needs Improvement

Sample Form D-2

Job Task Appraisal (continued)

Job Task:	
Performance Standard:	
Comments:	Appraisal Rating
	<input type="checkbox"/> Exceeds Job Requirement <input type="checkbox"/> Meets Job Requirement <input type="checkbox"/> Needs Improvement
Job Task:	
Performance Standard:	
Comments:	Appraisal Rating
	<input type="checkbox"/> Exceeds Job Requirement <input type="checkbox"/> Meets Job Requirement <input type="checkbox"/> Needs Improvement
Job Task:	
Performance Standard:	
Comments:	Appraisal Rating
	<input type="checkbox"/> Exceeds Job Requirement <input type="checkbox"/> Meets Job Requirement <input type="checkbox"/> Needs Improvement

Sample Form D-2

General Performance Factors

Performance Factors	Appraisal Rating
<p>Job Knowledge Possesses necessary skills and comprehensive knowledge to perform the job.</p>	<input type="checkbox"/> Exceeds Job Requirement <input type="checkbox"/> Meets Job Requirement <input type="checkbox"/> Needs Improvement
<p>Comments:</p>	
<p>Quantity of Work Completes tasks in a timely manner. Willingness to take on additional assignments. Persists until tasks are completed.</p>	<input type="checkbox"/> Exceeds Job Requirement <input type="checkbox"/> Meets Job Requirement <input type="checkbox"/> Needs Improvement
<p>Comments:</p>	
<p>Quality of Work Completes work as assigned, on time, neatly and in order with infrequent errors.</p>	<input type="checkbox"/> Exceeds Job Requirement <input type="checkbox"/> Meets Job Requirement <input type="checkbox"/> Needs Improvement
<p>Comments:</p>	
<p>Initiative Displays ability to perform assigned duties and improve work habits and/or output. Volunteers to help when needed.</p>	<input type="checkbox"/> Exceeds Job Requirement <input type="checkbox"/> Meets Job Requirement <input type="checkbox"/> Needs Improvement
<p>Comments:</p>	
<p>Supervision Performs routine and non-routine work assignments accurately and on-time with little or no supervision.</p>	<input type="checkbox"/> Exceeds Job Requirement <input type="checkbox"/> Meets Job Requirement <input type="checkbox"/> Needs Improvement
<p>Comments:</p>	

Sample Form D-2

General Performance Factors (continued)

Performance Factors	Appraisal Rating
<p>Adaptability Performs effectively and willingly when changes occur in scope and nature of the work and work environment.</p>	<input type="checkbox"/> Exceeds Job Requirement <input type="checkbox"/> Meets Job Requirement <input type="checkbox"/> Needs Improvement
<p>Comments:</p>	
<p>Judgment Makes mature, objective decisions and identifies areas of potential problems.</p>	<input type="checkbox"/> Exceeds Job Requirement <input type="checkbox"/> Meets Job Requirement <input type="checkbox"/> Needs Improvement
<p>Comments:</p>	
<p>Cooperation Cooperates willingly with supervisors, co-workers and others.</p>	<input type="checkbox"/> Exceeds Job Requirement <input type="checkbox"/> Meets Job Requirement <input type="checkbox"/> Needs Improvement
<p>Comments:</p>	
<p>Attendance Adheres to work schedule, follows procedures with respect to leave and submits accurate timesheets by prescribed deadlines.</p>	<input type="checkbox"/> Exceeds Job Requirement <input type="checkbox"/> Meets Job Requirement <input type="checkbox"/> Needs Improvement
<p>Comments:</p>	
<p>Communication Provides prompt, courteous and accurate assistance to agency staff, as well as to employees of other political entities and the public.</p>	<input type="checkbox"/> Exceeds Job Requirement <input type="checkbox"/> Meets Job Requirement <input type="checkbox"/> Needs Improvement
<p>Comments:</p>	

Sample Form D-2

Additional Comments and Signatures

Performance Plan:			
HR Generalist's Signature	Date	Director of HR's Signature	Date
Employee's Signature	Date	Supervisor's Signature	Date

Performance Appraisal			
<p>Supervisor's Review and Optional Comments: (Any comments concerning the contents of this document, may be indicated in the space below or using additional sheets, if necessary).</p>			
<p>Recommended action (if applicable):</p>			
<p>Employee's Review and Optional Comments (Any comments concerning the contents of this document may be indicated in the space below or using additional sheets, if necessary).</p>			
<p>I have read this document, consisting of _____ pages and have discussed the contents with my supervisor. My signature means that I have been advised of my performance status and have received a copy of this document.</p>			
Employee's Signature	Date	Supervisor's Signature	Date
Director's Signature	Date	Deputy Executive Administrator's Signature	Date
HR Generalist's Signature	Date	Director of HR's Signature	Date

Sample Form D-3



Texas Water Development Board PERSONNEL ACTION

Name: _____ Effective PA Date: _____
(Last) (First) (Middle)

Employment Date: _____

Action

- New Hire - Job Posting No.: _____
 Promotion
 Merit Increase
 One Time Merit
 Separation: _____
 Lateral Transfer
 Interagency Transfer From/To: _____
 Other: _____
 Reclassification

Present

Proposed

Division Name: _____

Division Name: _____

Department: _____
(Number) (Name)

Department: _____
(Number) (Name)

Classification: _____
(Number) (Title)

Classification: _____
(Number) (Title)

Salary: _____
(Group) (Monthly) (Annual)

Salary: _____
(Group) (Monthly) (Annual)

Position No.: _____

Position No.: _____

7001 Exempt
 7002 Full-Time
 7003 Part-Time
 Scheduled work hours _____
 Hours per week _____

7004 Temporary Full-Time
 Temporary Part-Time
 Hours per week _____

Justification: (Required)

To be completed by Office and Verified by HR

Last Salary Action

Date	Group	Monthly Amount
		\$

Current Performance Appraisal

Date	Yes or No

Verified by HR

Yes No

Director: _____ (Date)

Deputy Executive Administrator: _____ (Date)

To be completed by Human Resources

Management to Staff Ratio
<input type="checkbox"/> Manager
<input type="checkbox"/> Supervisor
<input type="checkbox"/> None

FLSA
<input type="checkbox"/> Exempt
<input type="checkbox"/> Non Exempt

EEO Code: _____
 HRIS Reason Code: _____

Director of Human Resources: _____ Deputy Executive Administrator of O&A: _____
(Date) (Date)

To be completed by Finance

PCA: _____ Within the Merit Allocation: _____

Budget Director: _____ Chief Financial Officer: _____
(Date) (Date)

To be completed by Executive Administration

Assistant Executive Administrator: _____ Executive Administrator: _____
(Date) (Date)

Sample Form D-4

Employee System Access Request						
Employee Last Name:		Employee First Name:		Work Phone:		
Employee Signature:						
Supervisor Last Name:		Supervisor First Name:		Work Phone:		
Supervisor Signature:						
Network Access to Files, Folders, and Programs (Objects) on the TWDB Domain						
Path (Example S:\TWDB04\Shared\Folder\Folder\Folder etc.)		All (v)	Read (R)	Write (W)	Modify (M)	Delete (D)
1.)						
2.)						
3.)						
System Access - See Page 2 for Instructions.						
FINANCE SYSTEMS - For access, contact Carl Speed after completing this form.				Enable Access <input type="checkbox"/>	Disable Access <input type="checkbox"/>	
ABEST - Automated Budget Evaluation of Texas						
ASAP - Automated Standard Application for Payments - U.S. Dept of Treasury						
DTCC - The Depository Trust & Clearing Corporation						
FIS - Financial Information System						
Trust Online - Texas Treasury Safekeeping Trust Company						
Financial Systems Access Form Required http://twdb/AGENCY/OCED/techservices.html				Enable Access <input type="checkbox"/>	Disable Access <input type="checkbox"/>	
EIS - Employee Information System (Help Desk and Administration)						
FMX - Fiscal Management Website						
MIP - Saga MIP Fund Accounting (Internal Accounting System)						
SPA - State Property Accounting						
TINS - Texas Identification Number Systems						
USAS - Uniform Statewide Accounting System						
USPS - Uniform Statewide Payroll/Personnel System						
OTHER SYSTEMS - Contact System Owner prior to submitting access request.				Enable Access <input type="checkbox"/>	Disable Access <input type="checkbox"/>	
CBR/PBR - Clean Water/Drinking Water SRF Benefits Reporting						
Cloud Portal(s): <input type="checkbox"/> Amazon (IT) <input type="checkbox"/> Amazon (Surface Water) <input type="checkbox"/> Terremark						
ISupport						
DCS Portal						
EIS - TWDB Employee Information System on IWEB						
Executive Mail Log						
Facebook/Twitter/YouTube						
GIS - Geographic Information System						
Gwdb - Ground Water						
Godb - Ground Water Conservation Districts						
DrRpts - Driller Reports						
haFILE: <input type="checkbox"/> Records Management <input type="checkbox"/> WRP <input type="checkbox"/> WHR						
OAG Database						
Performance Measure Database						
RMIS (SORM Database)						
Social Media: <input type="checkbox"/> FaceBook <input type="checkbox"/> Twitter						
SQL Server - (Please include in comments - SQL Server Name, Database Name, and Access)						
Texas Register						
Work in Texas						
Linux System(s): <input type="checkbox"/> Surface Water <input type="checkbox"/> TNRS						
Other System(s) not listed:						
Comments:						
Request Completed by: (IT/HD Staff Name)				Completed Date:		

Sample Form D-4

Instructions for Employee System Access Request:

This form must be signed and dated by the Employee and Manager/Team Lead before Employee Access Request will be enabled, or disabled.

Manager/Team Lead Verification: Confirm signature & secure multiply agency applications as applicable to employee. Refer to the list of applications as a guide; enter additional applications if needed in the section for "Other".

NOTE: All access must be specifically defined and should not use the term "same as".

Upon completion, please submit the signed original to IT/Help Desk.

Instructions for Network Access to Files, Folders, and Program (Objects) on the TWDB Domain)

In order to maintain Security and Accountability for giving access to our network resources it has become necessary to request that this Form be completed prior to granting network access.

NOTE: It is necessary to explain Network Access Requests in "Detail". We will no longer accept "the same as John Doe" or just use the Accounting Department standard. Example: S:\TWDB04\SHARED\folder \ folder \ folder \ etc.
V:\TWDB04\RIO\ folder \ folder \ etc

This can be accomplished by opening Microsoft Explorer and viewing the folders of a person whose access is similar. Specific access can be granted for applications also if specified. Access Rights listed below can be entered with each folder listed above. Example: S:\TWDB04\SHARED\ folder

NOTE: – Approval must be from the directory owner or manager/team lead of the section or department that owns the files. Approval must specify whether full rights or just read rights should be granted.

Access rights include the following – call the help desk for further clarification:

Read → List or Open files

Write → Open a file, modify the contents and save the file to your personal folders

Modify → Over Write the file in its present location

Delete → Delete the file in its present location

If you have any questions regarding this form please contact the Help Desk at 469-7764 or Email Help.Desk@twdb.state.tx.us

Instructions for Finance Systems Access

Click on this link for more instructions to obtain access to the Financial Systems Access.

http://web/AGENCY/OCFO/techsolutions_index.asp

Sample Form D-5



Outside Employment/Activity Notification Form

Please complete and return this form to TWDB Human Resources.

SECTION I - To be completed by employee.

1. Last Name: _____		First Name: _____		2. Program Area/Division: _____	
3. Classification Title: _____			4. Group: _____	5. What is your employee status? <input type="checkbox"/> New Hire or <input type="checkbox"/> Current Employee	
6. Describe your duties for the TWDB: 					
7. Do you currently work for pay outside of the TWDB, including self employment? (*If selecting No, signatures for Section II and Section III are not required. Please sign and route to Human Resources.) <input type="checkbox"/> Yes or <input type="checkbox"/> No*					
8. If you are self-employed under a corporate or assumed name, or have accepted or plan to accept other outside employment/activity, please include: <i>Employer's name and business address</i> 					
Describe nature of the employer's business, or entity and your duties for that employer/entity			Number of hours per week that you will work/serve		Days and hours you will be working/serving, if known
9. Employee Certification I hereby certify that: My duties in connection with the outside employment/activity described above (if any) will not conflict with or infringe on my duties with or responsibilities to the Texas Water Development Board. I understand that, if the circumstances reflected on this form change, I have a duty to resubmit this form advising my Deputy Executive Administrator before I accept any outside employment. I further certify that I have read the Standards of Conduct and Disclosure for the Texas Water Development Board, and I am aware that I may consult with the agency's Legal Division if I have any questions concerning those standards. If I become aware of any facts which might lead any person to believe that I might have a conflict of interest, or to question the independence of my judgement in the performance of my duties for the Texas Water Development Board, I will promptly advise my Deputy Executive Administrator of those facts, in writing. All of the statements made herein are true and correct to the best of my knowledge. <input type="checkbox"/> Yes <input type="checkbox"/> No Employee Signature _____ Date _____					

SECTION II - Senior Management

Will employee's outside employment/activity conflict with agency policy?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Dep. Exec. Administrator _____	Date _____		

SECTION III - Legal Services

Will employee's outside employment/activity conflict with agency policy?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Legal Services _____	Date _____		

The Texas Water Development Board does not discriminate on the basis of race, color, national origin, sex, sexual orientation or disability in employment or the provision of services. HR-036

Revised: 7/21/10

Sample Form D-6

Texas Water Development Board Job Posting Request (JPR)

				HR Use Only			
				Posting No.			
Position Information							
State Job Classification Title		Classification Number	Pay Group/Step		No. of Positions		
Position Job Title (as it will be posted)		Organization Code/Division		Work Location			
Vacating Employee:			Date Position will be vacant:				
Position Number:			Monthly Salary:				
<input type="checkbox"/> External Posting <input type="checkbox"/> Internal Posting		Projected Hire Date:					
Travel: <input type="checkbox"/> Yes (% of time ____)		<input type="checkbox"/> No	Full Time	<input type="checkbox"/> Part Time	<input type="checkbox"/> Temporary	<input type="checkbox"/> Intern	<input type="checkbox"/>
Hiring Manager:			Telephone:				
Panel Members Names:			Estimated Interview Date:				
New Position							
<input type="checkbox"/> New (if new position, attach justification)							
Recruitment Assistance							
Please answer the following questions:		YES	NO	Comments			
Could this position be reduced to part time?		<input type="checkbox"/>	<input type="checkbox"/>				
Could this position be filled with a university student or recent graduate? (i.e., research projects?)		<input type="checkbox"/>	<input type="checkbox"/>				
Does this position need to be advertised?		<input type="checkbox"/>	<input type="checkbox"/>				
Do you anticipate critical operational impact if this position is not filled within 30/60/90 (indicate which) days?		<input type="checkbox"/>	<input type="checkbox"/>				
Signature Approvals							
_____ Division Director		_____ Date	_____ Deputy Exec. Admin		_____ Date	_____ Director of HR	_____ Date
_____ Director of Budget		_____ Date	_____ Chief Financial Officer		_____ Date	_____ Deputy Exec. Admin. of Operations & Administration	_____ Date
_____ Assistant Executive Administrator		_____ Date	_____ Executive Administrator		_____ Date		

Sample Form D-7



Comptroller
of Public
Accounts
Form
13-174
Rev. (2-1-98)

TRAVEL VOUCHER / FORM

Page 1 of 1

1. Archive reference number	2. Agency number	3. Agency Name				4. Current document number
	5. Effective date (Agency use)	6. DOC date (First date of travel)	7. DOC agency	8. FY	9. Document amount	

10. Pay to:	11. Title
	12. Designated headquarters

13. Texas identification number	AGENCY USE
---------------------------------	------------

14. SFX	APPN	TC	FUND	PCA	AY	COBJ	AMOUNT
	INVOICE NUMBER	PMT DUE DATE	AGENCY USE				
	AGENCY USE						

15. SFX	APPN	TC	FUND	PCA	AY	COBJ	AMOUNT
	INVOICE NUMBER	PMT DUE DATE	AGENCY USE				
	AGENCY USE						

16. SFX	APPN	TC	FUND	PCA	AY	COBJ	AMOUNT
	INVOICE NUMBER	PMT DUE DATE	AGENCY USE				
	AGENCY USE						

18. Service date (Last date of travel)	17. Description (Agency use only)
	Travel to and from the TEXPERS Educational Conference in Dallas, TX

18. DISTRIBUTION							AMOUNT
Expense Itemization for in-state travel:							
Fares, Public transportation	Taxi	Air Fare	Rental Car				0.00
Personal car mileage	0.00	Miles @ (Rate set by Legislature)	0				0.00
Meals and / or lodging							0.00
Parking							0.00
Incidental expenses (Itemize)							0.00
							0.00
Expense Itemization for out-of-state travel:							
Fares, Public transportation	Taxi	Air Fare	Rental Car				0.00
Personal car mileage	0.00	Miles @ (Rate set by Legislature)	0				0.00
Meals and / or lodging							0.00
Parking							0.00
Incidental expenses (Itemize)							0.00
							0.00
TOTAL							

19. I certify that the expense account shown above is true, correct, and unpaid.

sign here Custodian Date	sign here Supervisor Date
20. Contact name - Agency sign here	Phone (Area code and number) - Title Date
21. Agency use	

Sample Form D-7

STATE OF TEXAS



Comptroller
of Public
Accounts 13-175
(Rev. 9-99-5)
Form

Page ___ of ___

1. Doc agency	2. Current document number
---------------	----------------------------

TRAVEL VOUCHER / FORM CONTINUATION

15. SFX	APPN	TC	FUND	PCA	AY	COBJ	AMOUNT
	INVOICE NUMBER		PMT DUE DATE	AGENCY USE			
	AGENCY USE						
15. SFX	APPN	TC	FUND	PCA	AY	COBJ	AMOUNT
	INVOICE NUMBER		PMT DUE DATE	AGENCY USE			
	AGENCY USE						
15. SFX	APPN	TC	FUND	PCA	AY	COBJ	AMOUNT
	INVOICE NUMBER		PMT DUE DATE	AGENCY USE			
	AGENCY USE						
15. SFX	APPN	TC	FUND	PCA	AY	COBJ	AMOUNT
	INVOICE NUMBER		PMT DUE DATE	AGENCY USE			
	AGENCY USE						
15. SFX	APPN	TC	FUND	PCA	AY	COBJ	AMOUNT
	INVOICE NUMBER		PMT DUE DATE	AGENCY USE			
	AGENCY USE						
15. SFX	APPN	TC	FUND	PCA	AY	COBJ	AMOUNT
	INVOICE NUMBER		PMT DUE DATE	AGENCY USE			
	AGENCY USE						
15. SFX	APPN	TC	FUND	PCA	AY	COBJ	AMOUNT
	INVOICE NUMBER		PMT DUE DATE	AGENCY USE			
	AGENCY USE						

Sample Form D-7

Form 73-300 (Rev. 12-07/02)

CONTINUATION SHEET

DATE	y. INFORMATION REQUIRED BY TEXTRAVEL AND OTHER PERTINENT INFORMATION	Mileage Point to Point*

*Show point-to-point breakdown, including intra-city mileage claims

Sample Form D-7

Form 73-309 (Rev. 12-97/2)

CONTINUATION SHEET

DATE	y. INFORMATION REQUIRED BY TEXTRAVEL AND OTHER PERTINENT INFORMATION	Mileage Point to Point*

*Show point-to-point breakdown, including intra-city mileage claims

Sample Form D-7

Form 73-309 (Rev. 12-97/2)

CONTINUATION SHEET

DATE	y. INFORMATION REQUIRED BY TEXTRAVEL AND OTHER PERTINENT INFORMATION	Mileage Point to Point*

*Show point-to-point breakdown, including intra-city mileage claims

Sample Form D-7

Form 73-309 (Rev. 12-97/2)

CONTINUATION SHEET

DATE	y. INFORMATION REQUIRED BY TEXTRAVEL AND OTHER PERTINENT INFORMATION	Mileage Point to Point*

*Show point-to-point breakdown, including intra-city mileage claims

Sample Form D-7

Form 73-309 (Rev 12-97/2)

CONTINUATION SHEET

DATE	y. INFORMATION REQUIRED BY TEXTRAVEL AND OTHER PERTINENT INFORMATION	Mileage Point to Point*

*Show point-to-point breakdown, including intra-city mileage claims

Sample Form D-7

STATE OF TEXAS



Comptroller
of Public
Accounts
Form
73-175
(Rev. 9-92/5)

Page of

1. Doc agency	2. Current document number
---------------	----------------------------

TRAVEL VOUCHER / FORM CONTINUATION

15. SFX	APPN	TC	FUND	PCA	AY	COBJ	AMOUNT
	INVOICE NUMBER		PMT DUE DATE	AGENCY USE			
	AGENCY USE						
15. SFX	APPN	TC	FUND	PCA	AY	COBJ	AMOUNT
	INVOICE NUMBER		PMT DUE DATE	AGENCY USE			
	AGENCY USE						
15. SFX	APPN	TC	FUND	PCA	AY	COBJ	AMOUNT
	INVOICE NUMBER		PMT DUE DATE	AGENCY USE			
	AGENCY USE						
15. SFX	APPN	TC	FUND	PCA	AY	COBJ	AMOUNT
	INVOICE NUMBER		PMT DUE DATE	AGENCY USE			
	AGENCY USE						
15. SFX	APPN	TC	FUND	PCA	AY	COBJ	AMOUNT
	INVOICE NUMBER		PMT DUE DATE	AGENCY USE			
	AGENCY USE						
15. SFX	APPN	TC	FUND	PCA	AY	COBJ	AMOUNT
	INVOICE NUMBER		PMT DUE DATE	AGENCY USE			
	AGENCY USE						
15. SFX	APPN	TC	FUND	PCA	AY	COBJ	AMOUNT
	INVOICE NUMBER		PMT DUE DATE	AGENCY USE			
	AGENCY USE						
15. SFX	APPN	TC	FUND	PCA	AY	COBJ	AMOUNT
	INVOICE NUMBER		PMT DUE DATE	AGENCY USE			
	AGENCY USE						

Sample Form D-7

Travel Voucher Requirements Checklist

- Travel Authorization Form – Prepared prior to travel (Original attached by Travel Accountant)
- Travel Voucher
- Original Receipts (i.e. hotel, gas, parking, taxi, other incidental, etc)
- Flight or Rental car receipts (if applicable)
- Contract hotel listing (if applicable)
- Map Quest showing mileage from point A to point B (if applicable)
- GSA allowance guide for meals and lodging rates. NACO will also need to be attached if city is not listed on GSA (if city or county is not listed on GSA rate defaults to GSA's standard meal and lodging in-state and out-of-state rates when traveling to non-listed locations)
- State Contracted Vendor Exceptions noted in description section Y (i.e lodging, airfare, rental car) (if applicable)
- Washington DC travel requires Texas Office of State-Federal Relations (OSFR) to be notified on line (if applicable)

Sample Form D-8

Texas Water Development Board Travel Authorization

Division		Information	
Section			Employee
Originator			Prospective Employee
			Transportation
TA Request Date			Airline
		x	Rental Vehicle
Traveler Name			State Vehicle # _____
Employee #			Personal Vehicle

Travel Itinerary			
Date Depart:		Time Depart:	
Date Return:		Time Return:	
		In-State	
		Out-of-State	

Purpose and Destination of Travel (Out of state travel requires EA signature)

Multiple Employees traveling to the same location must justify why this is necessary. List name of individuals and justification below:

Estimated Expenses	
Airline/Rental Car	
Public Transportation	
Mileage	
Meals/Lodging	
Parking	
Incidental Expenses	
Registration Fees	
Total	-

DART Card	
Requested Amount	
Additional Information:	

Accounting Use ONLY	
Date Card Loaded	
Ctl Rep Name	
Notes:	

Agency Authorization

I certify that the purpose of all travel is necessary. It is planned to achieve maximum economy and efficiency for the State of Texas and the Water Development Board.

Traveler Signature / Date

Budget Officer / Date (I certify that funding is available)

Supervisor or Designee / Date

Executive Administrator / Date (Required for all out-of-state travel)

Deputy Executive Administrator / Date

Sample Form D-9



Introductory Period Evaluation Form

To assist in determining the suitability of continuing employment at the Texas Water Development Board, the supervisor will complete the applicable portion of this form and discuss this form with the employee at the times specified below.

Check one: 6 Weeks 3 months 6 months

Employee's Name: _____

Program Area: _____

Division: _____

Hire Date: _____

Employee's Position Title: _____

6 WEEKS OR 3 MONTHS REVIEW: Check appropriate box below based on your observance of employee's job performance, work habits and productivity.

1. Employee is making satisfactory progress.
2. Employee is making marginal (barely acceptable) progress
3. Employee is not making satisfactory progress
4. Performance plan completed and discussed with employee

Note: If 2 or 3 is checked, please justify retention or termination in the space below and route to the Director of Human Resources.

REMARKS/NARRATIVE COMMENTS:

Evaluated by: _____

Date of Evaluation: _____

Manager/Director

Employee Signature: _____

Date: _____

Reviewed by: _____

Date of Review: _____

Division Director

Reviewed by: _____

Date of Review: _____

Director of Human Resources

SIX (6) MONTHS REVIEW RECOMMENDATION: Check appropriate box below based on your observance of employee's job performance, work habits and productivity.

- This employee is recommended for retention as a regular employee.
- Extension of introductory period is recommended for _____ days. Employee will be reviewed on _____.
- This employee is not recommended for retention as a regular employee for the following reasons:

REMARKS/NARRATIVE COMMENTS:

Evaluated by: _____

Date of Evaluation: _____

Manager/Director

Employee Signature: _____

Date: _____

Reviewed by: _____

Date of Review: _____

Division Director

Reviewed by: _____

Date of Review: _____

Director of Human Resources

Sample Form D-9



Introductory Period Evaluation Form

To assist in determining the suitability of continuing employment at the Texas Water Development Board, the supervisor will complete the applicable portion of this form and discuss this form with the employee at the times specified below.

Check one: 6 Weeks 3 months 6 months

Employee's Name: _____

Program Area: _____

Division: _____

Hire Date: _____

Employee's Position Title: _____

6 WEEKS OR 3 MONTHS REVIEW: Check appropriate box below based on your observance of employee's job performance, work habits and productivity.

1. Employee is making satisfactory progress.
2. Employee is making marginal (barely acceptable) progress
3. Employee is not making satisfactory progress
4. Performance plan completed and discussed with employee

Note: If 2 or 3 is checked, please justify retention or termination in the space below and route to the Director of Human Resources.

REMARKS/NARRATIVE COMMENTS:

Evaluated by: _____ Date of Evaluation: _____
Manager/Director

Employee Signature: _____ Date: _____

Reviewed by: _____ Date of Review: _____
Division Director

Reviewed by: _____ Date of Review: _____
Director of Human Resources

SIX (6) MONTHS REVIEW RECOMMENDATION: Check appropriate box below based on your observance of employee's job performance, work habits and productivity.

- This employee is recommended for retention as a regular employee.
- Extension of introductory period is recommended for ____ days. Employee will be reviewed on ____.
- This employee is not recommended for retention as a regular employee for the following reasons:

REMARKS/NARRATIVE COMMENTS:

Evaluated by: _____ Date of Evaluation: _____
Manager/Director

Employee Signature: _____ Date: _____

Reviewed by: _____ Date of Review: _____
Division Director

Reviewed by: _____ Date of Review: _____
Director of Human Resources