

Virginia Military Institute  
Lexington, Virginia 24450-0304

**REQUEST FOR PROPOSALS**  
**RFP # V211-24-081**

Issue Date: 1 March 2024  
Title: VMI Cadet Dress Caps and Shakos  
Due Date: 2 April 2024 at 2:00 PM EST  
Commodity Code: 20010 / 20120 / 20137 / 20147  
Issuing Agency: Virginia Military Institute

Period of Contract: One year following Date of Award with four (4) optional one-year renewals.

**Proposals should be submitted electronically through the eVA procurement portal.**

All Inquiries for Information Should Be Directed To: Shana O'Quinn, VMI Procurement Services at [procurement@vmi.edu](mailto:procurement@vmi.edu). **Use of the Understanding of Requirements Form, Attachment D, must be used. No phone calls will be accepted; no emails will be answered. Answers will be posted in the form of an addendum.**

In Compliance With This Request For Proposals And To All The Conditions Imposed Therein And Hereby Incorporated By Reference, The Undersigned Offers And Agrees To Furnish The Goods/Services In Accordance With The Attached Signed Proposal Or As Mutually Agreed Upon By Subsequent Negotiation.

Name And Address Of Firm:

\_\_\_\_\_  
Keystone Uniform Cap  
2251 Frealey Street  
Phila. PA Zip Code: 19137

Date: March 18, 2024  
By: [Signature]  
(Signature In Ink)  
Name: April Wolkow  
(Please Print)  
Title: Management

EVA Vendor ID or DUNS number E77732 Phone: (215) 821-3434  
E-mail: april@keystoneuniformcap.com Fax: (215) 821-3438  
Minority Vendor: \_\_\_\_\_ Woman owned: \_\_\_\_\_ Small Business \_\_\_\_\_ CERTIFICATION #: \_\_\_\_\_

\*NOTE: If you are an individual with a disability and need reasonable accommodations, please contact LTC Lynn Carmack (540) 464-7223, no later than 4:00 PM EST, 4 March 2024.

**Note: This public body does not discriminate against faith-based organizations in accordance with the Code of Virginia, § 2.2-4343.1 or against a bidder or offeror because of race, religion, color, sex, national origin, age, disability, sexual orientation, gender identity, political affiliation, or veteran status or any other basis prohibited by state law relating to discrimination in employment. Faith-based organizations may request that the issuing agency not include subparagraph 1.f in General Terms and Condition C. Such a request shall be in writing and explain why an exception should be made in that invitation to bid or request for proposal.**

ATTACHMENT A

The following information is required as part of your response to this solicitation. Failure to complete and submit this form may result in disqualification of your bid as non-

QUALIFICATIONS: The vendor must have the capability and capacity in all respects to satisfy fully all of the contractual requirements.

VENDOR'S PRIMARY CONTACT:

Name: April Wolkow Phone: (215) 821-3434 x103  
Email: april@keystoneuniformcap.com

Length of Time in this Business: YEARS: 9 MONTHS: (Keystone - 106 yrs)

responsive.

REFERENCES: Indicate below a listing of at least three (3) current or recent accounts, either commercial, industrial or governmental, that your company is servicing, has serviced, or has provided similar goods/services. Include the length of service and the name, address and telephone number of the point of contact.

COMPANY: MS CATHN CONTACT NAME: Tom Rosati

PHONE: (212) 563-7292 EMAIL: Rosati.tom1@gmail.com  
FAX: (212) 563-7299

PROJECT: \_\_\_\_\_  
DATE(S) OF SERVICE: 50 yrs VALUE: \$ \_\_\_\_\_

COMPANY: Hamburger Woolen CONTACT NAME: Eric

PHONE: (516) 352-7400 EMAIL: egilman@hwcny.com  
FAX: (516) 352-7704

PROJECT: \_\_\_\_\_  
DATE(S) OF SERVICE: 50 yrs VALUE: \$ \_\_\_\_\_

COMPANY: Grip Flex CONTACT NAME: Jennifer

PHONE: (215) 743-7492 EMAIL: jramos@gripflexcorporation.com  
FAX: \_\_\_\_\_

PROJECT: \_\_\_\_\_  
DATE(S) OF SERVICE: 50 yrs VALUE: \$ \_\_\_\_\_

ATTACHMENT B

CONFLICT OF INTEREST STATEMENT

The following information is required as part of your response to this solicitation. Failure to complete and submit this form may result in disqualification of your bid as non-responsive.

NAME: Keystone Uniform Cap  
ADDRESS: 2251 Fraley Street  
CITY/STATE: Philadelphia PA 19137  
TELEPHONE NUMBER: (215) 821-3434  
FEDERAL ID NUMBER (FIN): 23-2897156

THE ABOVE FIRM IS A: (CHECK, AS APPLICABLE)

- |  |   |
|--|---|
| <input type="checkbox"/> SMALL BUSINESS          | <input type="checkbox"/> INDIVIDUAL BUSINESS    |
| <input type="checkbox"/> WOMAN-OWNED BUSINESS    | <input type="checkbox"/> SOLE PROPRIETORSHIP    |
| <input type="checkbox"/> MINORITY-OWNED BUSINESS | <input checked="" type="checkbox"/> PARTNERSHIP |
| <input type="checkbox"/> SHELTERED WORKSHOP      | <input type="checkbox"/> CORPORATION            |

RELATIONSHIP WITH VIRGINIA MILITARY INSTITUTE:

IS ANY MEMBER OF THE FIRM AN EMPLOYEE OF THE COMMONWEALTH OF VIRGINIA WHO HAS A PERSONAL INTEREST IN THIS CONTRACT PURSUANT TO THE CODE OF VIRGINIA, SECTION 2.1-639.1-639.24? ☐ YES ☒ NO

IF YES, EXPLAIN:

  
SIGNATURE OF OFFEROR

3/18/24  
DATE

Please tell us how you received this solicitation:

- ☐ It was mailed to you directly.
- ☐ You requested a copy through the Virginia Business Opportunities.
- ☐ You obtained a copy from the Virginia Department of Minority Business Enterprise.
- ☒ Other (please specify) EVA

## ATTACHMENT H

**PRICING SCHEDULE:** The Offeror shall furnish VMI Cadet Dress Caps and Shakos as specified in this Request for Proposals. Multiple orders may be issued for each item during the contract period and may include a variety of sizes and quantities. If volume discounts are available, please provide that information separately from this price sheet. Otherwise, VMI will assume that the price is constant regardless of the order quantity.

Description	Quantity	Price Each
VMI Cadet Dress Cap	1 Each	\$43 <sup>20</sup>
VMI Cadet Shako	1 Each	NA
VMI Cadet Shako Pom Pon	1 Each	NA