OFFEROR'S INFORMATION FORM

	Concern (Corporation, Partnership, Joint Venture, Other)	
If a corporation, in \	What State Incorporated and Date of Incorporation:	
State:	Date:	
If a Joint Venture or	r Partnership, Provide Date of Agreement:	
Date:		
	artners or officers as appropriate and indicate if the individual h Provide proof of the ability of the individuals so named to lega	
Name	Address	Title
List all known firms as applicable)	that may participate in this project (including prime contracto	rs, subcontractor
as applicable)	that may participate in this project (including prime contracto Address	
as applicable) <u>Name</u>	Address	
as applicable) <u>Name</u> I:	Address	
as applicable) <u>Name</u> 1: 2:	Address	
as applicable) <u>Name</u>	Address	
as applicable) <u>Name</u> : 2: 3:	Address	
as applicable) Name	Address	
as applicable) Name	Address as of responsibility for each firm listed in Question 6.	

8: Identify the provisions of any agreement between the respondent and any potential joint venture or

subcontractor	parties which	assign legal	or financial liabilities	or responsibilities:

9:	If responding firm(s) are a partially or fully-owned subsidiary of another firm, or share common ownership with another firm, please identify the related firms and the relationships:							
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					-			
					-			
					-			
					-			
			ative for the Offeror named at tions and Marketing Agency.	pove, in compliance with the	-			
	-	•	acknowledges receipt of the	-				
Add	endum No:	, dated	, Addendum No:	, dated				
Add	endum No:	, dated	, Addendum No:	, dated				
for F			be awarded in accordance w e right to reject any or all prop					
			the event the contract are no nd additional expenses to the		t forth			
Res	pectfully Submitted,							
By: (Authorized Signatu	<mark>re</mark>)	Da	te:				
By: (Same name, printe	d or typed)						
Title	:							
Corr	ipany:							
Pho	ne:							

SIGN HERE