

LETTER OF INTENT
(Requested prior to 4:00 pm EDT [8/2/10])

A. Proposer Information

Offeror's Legal Name: _____

Address: _____

City: _____ State: _____ Zip: _____

B. Contact Information

Name of Person with Signature Authority: _____

This person binds the offeror to the terms and conditions submitted in response to this RFP.

Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Fax Number: _____

E-Mail Address: _____

Name of Primary Contact Person:

This person will be contacted if FDDC has questions about the offer submitted and if the offeror is chosen for contract negotiations.

Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Fax Number: _____

E-Mail Address: _____