

STATE OF INDIANA IVOSB SUBCONTRACTOR COMMITMENT FORM

RFP#: 23-73695 FOR CLUSTER F

TOTAL BID AMOUNT: \$0

Company Name: Address: Sub-Contract Amount: Sub-Contract Percentage of Total Bid: 		Contact Person: E-mail: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Telephone Number: ()</td> <td style="width: 50%;">Fax Number: ()</td> </tr> </table> Describe service/product to be provided and <u>how this is a Valuable Scope Contribution of the Contract:</u> 	Telephone Number: ()	Fax Number: ()
Telephone Number: ()	Fax Number: ()			
Provide approximate dates when Sub-Contractor will perform on this project:				

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Blue River Services, Inc.

Respondent Firm

PO Box 547

Address

Corydon, IN 47112

City/State/Zip Code

Jennifer Owens

Representative

12/6/2022

Date

812-738-1987

Telephone Number

812-738-1867

Fax Number

jowens@brsinc.org

Email Address

Authorizing Signature

Daniel J. Lowe, CEO

Printed Name and Title

☐ Please check if additional forms are attached.

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FORM MUST BE COMPLETED IN ITS ENTIRETY WITH COMPLETED LETTERS OF COMMITMENT.