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| **REQUEST FOR PROPOSALS****RFP # DOC-IMS-2019-MG****Department of Correction** |
| **Attachment 6: Letter of Intent** |

Return to:

Michael B. Greene

Department of Correction

24 Wolcott Hill Road

Wethersfield, CT 06109

860-692-6823 (Telephone)

DOC.RFP@ct.gov (E-mail)

The organization below intends to submit a proposal in response to the above referenced RFP and have indicated the list of proposed service(s) on the attached matrix.

Please indicate proposed service to be provided on Attachment 8.

Note: This letter is a non-binding expression of interest and does not obligate the sender to submit a proposal.

**Prospective Proposer:**

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|  | **( ) -** |

Legal Name Telephone Number

|  |  |  |
| --- | --- | --- |
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Mailing Address Town, State Zip Code

**Contact Person:**

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Name Title

|  |  |  |
| --- | --- | --- |
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Mailing Address Town, State Zip Code

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| **( ) -** | **( ) -** |  |

Telephone Number FAX Number E-mail Address

**Person Authorized to Sign Contract:**

|  |  |
| --- | --- |
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Name Title

|  |  |
| --- | --- |
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Signature Date