



## Appendix 5 Cover Letter Form

Organization name: \_\_\_\_\_

Primary contact person: \_\_\_\_\_

Title: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Email address: \_\_\_\_\_

Secondary contact person: \_\_\_\_\_

Title: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Email address: \_\_\_\_\_

Please list the catchment area(s) and/or cities and towns in the catchment area(s) for which you are bidding. See Appendix 1 for a list of CBHC catchment areas.

\_\_\_\_\_

I agree that this response is effective through the date that this organization executes a contract with MBHP pursuant to this RFP.

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

**This cover sheet must be the first page of the bidder's response.**