

**SECTION V - ATTACHMENTS**

Solicitation No. 20-0016

**ATTACHMENT N**

**Recall Contact Information**

Proposer Name: \_\_\_\_\_ Date: \_\_\_\_\_

**Primary Contact:**

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

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

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

Office Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

**Back Up Contact:**

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

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

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

Office Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

**Recall Contact Information Completed by:**

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

Title: \_\_\_\_\_ Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-Mail: \_\_\_\_\_

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