**Amended Appendix A**

**Acknowledgement of Receipt Form of RFP and Notice of Intent to Participate**

RFP # Pharmacy 2022

In acknowledgment of receipt of this Request for Proposal (RFP), the undersigned agrees that s/he has received a complete copy, beginning with the title page and table of contents, and ending with Appendix K.

The Acknowledgment of Receipt Form should be signed and returned to the Procurement Contact BY EMAIL on or before **April 14, 2021** **at 3:00 PM (AST).** Only potential Offerors who return this completed form, indicating the intent to submit a Proposal, will be able to participate in the Preproposal Conference, receive Offerors’ written questions, the written responses to those questions, and RFP amendments, if any are issued, and may continue to participate in this RFP process.

ORGANIZATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CONTACT REPRESENTATIVE\*:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TITLE\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE NO\*.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FAX NO.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MAILING ADDRESS\*:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE: \_\_\_\_\_\_\_\_ ZIP CODE: \_\_\_\_\_\_\_\_\_\_\_\_\_

Please respond as follows:

1. Firm does/does not ***(circle one)*** intend to respond to this RFP.
2. Firm intends to respond to ***(circle one):***
3. PBM Services Only
4. RA Services Only
5. Combined Services
6. Name of individuals participating in the Preproposal Conference:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FIRST NAME** | **LAST NAME** | **EMAIL ADDRESS** | **PHONE NUMBER** | **IN PERSON** | **VIRTUAL** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

SIGNATURE\*\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Name and address herein provided will be used for all correspondence related to this RFP except that the invitation to present the best and final offer and the Notice of Intent to Award will be notified to the person authorized to sign the Contract, that is, the person identified under Item 2 of Appendix B. Hence, the contact information in this Appendix **must be the information of the same person identified in the request for the RFP Documents and to be provided in Appendix B, Item 3.**

\*\*This document must be signed either by the person authorized to communicate during the process with ASES’ Procurement Contact or the person authorized to contractually obligate the organization. See Sections 3.3.2, 4.8, 6.7.3.4 and Appendix B, Items 2 & 3 of this RFP.