FORM B-1: GOVERNMENTAL ENTITY

Authorized Officials

Legal Business Name of Respondent:	

Include the full names (last, first, middle) and addresses for the officials who are authorized to enter into a contract on behalf of the respondent.

Name: _____ Title: _____ Phone: _____ Ext. Fax: _____ Email: _____	Mailing Address (incl. street, city, county, state, & zip): _____ _____ _____ _____
Name: _____ Title: _____ Phone: _____ Ext. Fax: _____ Email: _____	Mailing Address (incl. street, city, county, state, & zip): _____ _____ _____ _____
Name: _____ Title: _____ Phone: _____ Ext. Fax: _____ Email: _____	Mailing Address (incl. street, city, county, state, & zip): _____ _____ _____ _____
Name: _____ Title: _____ Phone: _____ Ext. Fax: _____ Email: _____	Mailing Address (incl. street, city, county, state, & zip): _____ _____ _____ _____
Name: _____ Title: _____ Phone: _____ Ext. Fax: _____ Email: _____	Mailing Address (incl. street, city, county, state, & zip): _____ _____ _____ _____
Name: _____ Title: _____ Phone: _____ Ext. Fax: _____ Email: _____	Mailing Address (incl. street, city, county, state, & zip): _____ _____ _____ _____