PRE-BID CONFERENCE RESPONSE FORM WEDNESDAY, SEPTEMBER 25, 2024, 2:00 PM

Solicitation Number BPM046180

MHBE Talkdesk Subscription

Return via e-mail this form to the Procurement Officer (Tracey D. Gamble) by Thursday, September 19.

Name of Firm	n (please print)
Signature	Title
Please specify	whether any reasonable accommodations are requested:
No, we will no	ot be in attendance.
3.	
2.	
1.	
Yes, the follo ADDRESS):	owing representatives will be in attendance: (PLEASE PROVIDE NAME AND EMAI
Please indicate	te:
	Email: tracey.gamble1@maryland.gov
	Baltimore, MD 21202
	750 East Pratt Street, 6th Floor
	Maryland Health Benefit Exchange
2024:	man this form to the Procurement Officer (Tracey D. Gambie) by Thursday, September 1