

Proposal Assurance and Signature Form

I, _____ : _____
Name Title

As an authorized representative of _____
Name of Bidder Entity

I certify that I am empowered to transact business for _____
Name of Bidder Entity

I assure that all statements/claims made in this proposal are factual. I further assure the above named organization is an Equal Opportunity Employer, in compliance with accessibility laws and not prohibited from receiving federal funds.

Signature

Date

Witness:

Signature

Name

Title

Date