

ATTACHMENT #1

Bid Form - BOP-1206

IFB #270786 - PLCB 2024 GIFT CARDS

Signature of Authorized Representative of Bidder:	
Printed Name of Authorized Bid Signatory	
Full Legal Name of Individual or Entity:	
Address of Bidding Individual or Entity:	
Contact Phone Number:	
Contact Email Address:	
Company Accounting Email Address:	
Date:	