

**ATTACHMENT D  
CONTRACTOR REFERENCE FORM**

OFFEROR'S NAME: \_\_\_\_\_

OFFERORS: Provide at least three (3) references that can verify the offeror's experience and ability to provide the goods and services identified in the solicitation.

Agency Name:	Contract Period:
Contact Person ( <i>Name and Title</i> ):	
Complete Primary Address:	
Telephone Number:	E-mail Address:
Project Name:	Go Live Date:
Modules/Functionality Installed:	
Other Comments:	

Agency Name:	Contract Period:
Contact Person ( <i>Name and Title</i> ):	
Complete Primary Address:	
Telephone Number:	E-mail Address:
Project Name:	Go Live Date:
Modules/Functionality Installed:	
Other Comments:	

Agency Name:	Contract Period:
Contact Person ( <i>Name and Title</i> ):	
Complete Primary Address:	
Telephone Number:	E-mail Address:
Project Name:	Go Live Date:
Modules/Functionality Installed:	
Other Comments:	

**REFERENCE CHECK RELEASE STATEMENT**

You are authorized to contact the references provided and those entities to which the offeror is providing the same or similar service to obtain information about the offeror for purposes of the solicitation.

Offeror's Signature (*Authorized Representative*): \_\_\_\_\_

Print Name and Title of Signer: \_\_\_\_\_

Dated this \_\_\_\_ day of \_\_\_\_ 20\_\_\_\_