STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY

AGENCY REQUEST FOR PROPOSAL

VENDOR NAME AND ADDRESS:	RETURN THIS PROPOSAL TO: centralprocurement@doh.nj.gov	DELIVER TO: centralprocurement@doh.nj.gov
SBE CATEGORY:	FAX NUMBER: n/a	
NOTE: This proposal must be received by the opening date/time at the place named above. 2pm EST Monday, March 29, 2021	AGENCY PERSON TO CONTACT: Julie McGowan Julie.mcgowan@doh.nj.gov	

FISCAL YEAR:	ACCOUNT NUMBER:	AGENCY REFERENCE NUMBER:	COMMODITY CODE NUMBER:
21	n/a	n/a	n/a

ITEM NUMBER	QUANTITY	UNIT	DESCRIPTION (ALL ITEMS MUST BE DELIVERED F.O.B. DESTINATION)	UNIT PRICE	AMOUNT
Please see attached SOW					