## **Subcontractor or Supplier's Statement of Intent to Contract and Perform**

Project Name					P	roject N	Number			
Contractor Name _				_		ederal T D.	Гах			
Subcontractor or Mate	erial Supplie	er								
Name					P	hone				
Address					F	ax				
City, State ZIP					E	-mail				
						ederal T	Гах			
Certification				_	Ι.	D.				
Percentage of proposed participation:*	ì	<u>%</u>		.nti rm	_	oated c	ost or fee p	ayable t	o <u>\$</u>	
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