

**Attachment D
In-State Preference Form
ITB-DEM-19-20-026 WebEOC**

The Bidder is required to complete and submit this form signed with its Submission to be considered for this preference.

Vendor Name: _____

Federal Employer ID Number: _____

This Respondent (does) / (does not) have a principal place of business located in the State of Florida.

Please provide the Florida address if applicable:

A Vendor whose principal place of business is **outside** the state of Florida must accompany any written Submission documents with a written opinion of an attorney licensed to practice law in that foreign state, as to the preferences, if any or none, granted by the law of that state to its own business entities whose principal place of business is in that foreign state in the letting of any or all public purchases.

Please attach such opinion as applicable to this form.

Authorized Signature: _____

Print Name and Title: _____

Date: _____