

**Attachment B
Bidder Information Form**

Solicitation Number: ITB No. 03-25100000-A Motor Vehicles		
Please ensure the information provided in this form matches the MyFloridaMarketPlace ("MFMP") Vendor Registration account information: Florida Vendor Information Portal . DO NOT CHANGE THE FORMAT OF THIS FORM.		
BIDDER NAME:		
BIDDER FEID NO.:		
STREET ADDRESS:		
CITY, STATE and ZIP:		
INTERNET ADDRESS:		
TELEPHONE NO.:		
TOLL-FREE NO.:		
	Primary Solicitation Contact Person	Alternate Solicitation Contact Person
NAME:		
TITLE:		
STREET ADDRESS:		
CITY, STATE and ZIP:		
E-MAIL ADDRESS:		
TELEPHONE NO.:		
TOLL-FREE NO.:		
CELL PHONE NO.:		
	Contract Manager	Back-up Contract Manager
NAME:		
TITLE:		
STREET ADDRESS:		
CITY, STATE and ZIP:		
E-MAIL ADDRESS:		
TELEPHONE NO.:		
TOLL-FREE NO.:		
CELL PHONE NO.:		
TOLL FREE CUSTOMER SERVICE PHONE SUPPORT NUMBER		