

[Completion of this form may be requested during the Negotiation Phase of the ITN.]

**DEPARTMENT OF FINANCIAL SERVICES
Business Reference Form**

Attachment E

This business reference is for (Respondent's Name): _____

The Respondent shall require its references to complete the form below. References should be directly relevant to the services in the solicitation.

This form must be completed by the person giving the reference for the Respondent named above. The Respondent is submitting a reply to a procurement. For purposes of this form, the Respondent is a business entity that currently or has previously provided services to your organization.

Upon completion of this form, please return the original to the Respondent.

REFERENCE INFORMATION	
Organization Name:	Phone #: () -
Reference Name:	Title:

BUSINESS RELATIONSHIP WITH RESPONDENT	
Relationship to Respondent: (e.g., subcontractor, customer).	Years of Relationship: _____ Dates:
If a customer, please describe the primary service the Respondent provides your organization:	Respondent acted as: <input type="checkbox"/> primary provider or <input type="checkbox"/> subcontractor or <input type="checkbox"/> N/A
Do you have a business or professional interest in the Respondent's organization?: <input type="checkbox"/> Yes or <input type="checkbox"/> No	
If yes, please describe:	

PERFORMANCE OF RESPONDENT
Have you experienced any performance problems with the Respondent's organization?: <input type="checkbox"/> Yes or <input type="checkbox"/> No
If yes, please describe:

As the person authorized to sign this form, I certify that the above information is correct. I also certify that I am not:

- a current employee of the Department;
- a former employee of the Department, within the past three (3) years;
- a person currently or formerly employed by the Respondent's organization;
- a board member of the Respondent's organization; or
- a relative of any of the above.

I further certify that:

- the business organization that I work for is not based solely in a foreign country; and
- a member of the Respondent's organization, has not written and/or otherwise completed this form on my behalf.

Reference's Signature

Date

Reference Name