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**UNIVERSITY OF CONNECTICUT HEALTH CENTER**  
**Procurement Operations & Contracts**  
**263 Farmington Avenue, MC4036**  
**Farmington, CT 06032-4036**

RFP NUMBER:	PROPOSAL DUE DATE:	PROPOSAL DUE TIME:	RFP SURETY:
UCHC5-118665069	7/10/2019	2:00pm EST	N/A
RFP TITLE: Web Based CDM & Revenue Capture Tool			

**ADDENDUM NUMBER: 2**

**DATE ADDENDUM ISSUED:** 6/24/2019

**FOR:** The University of Connecticut Health Center

**NOTE:** Answers to Supplier Questions

**This Addendum must be *Signed & Returned* with your proposal.**

\_\_\_\_\_  
*Authorized Signature of Proposer*

\_\_\_\_\_  
*Company Name*

Approved By: \_\_\_\_\_

*Patricia Berry*  
\_\_\_\_\_  
Patricia Berry  
Buyer

*(Original Signature on Document in Procurement Files)*