

REQUEST FOR INFORMATION ADDENDUM UCHC RFI-02 Form Rev. 2/15

DUE TIME:

Patricia Berry

Buyer

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UNIVERSITY OF CONNECTICUT HEALTH CENTER

Procurement Operations & Contracts 263 Farmington Avenue, MC4036 Farmington, CT 06032-4036

5-2020	2/13/2020		2:00pm	EST
RFI TITLE:	CME Application Review Process			
ADDENDUM NU	JMBER:	2		42
DATE ADDENDUM I	SSUED:	1/23/2020		
	FOR:	The University of Connecticut	Health Center	5
NOTE:		Please see Updated instructions		
		4		
				2
This Addendum must be Signed & Returned with your submission.				
Authorized Signature of F	Proposer	Company .	Name	

DUE DATE:

(Original Signature on Document in Procurement Files)

Patricia Berry Buyer

Approved By: