

Exhibit D



Proposer Response Form

Project: Pre-construction and Construction Management at Risk Services

The undersigned certified that (s)he is authorized to submit this SOQ on behalf of the entity named below:

Name of Respondent: _____

Address of Respondent: _____

Louisiana contractor's license number: _____

Name of authorized signatory of bidder: _____

Title of authorized signatory of bidder: _____

Signature of authorized signatory of bidder: _____

Date: _____

(NOTE: If SOQ is submitted by Co-respondents (including Joint Venturers), an authorized signature from a representative of each Co-respondent is required. Add additional signature blocks as required.)

Name of Respondent: _____

Address of Respondent: _____

Louisiana contractor's license number: _____

Name of authorized signatory of bidder: _____

Title of authorized signatory of bidder: _____

Signature of authorized signatory of bidder: _____

Date: _____

Exhibit D



Acknowledgement of Addenda

Project: Pre-construction and Construction Management at Risk Services

Respondent Entity Name: _____

Respondents must acknowledge all addenda.

The following **ADDENDA** have been received and considered:

Addendum Number: _____ Dated: _____ Signature: _____

Addendum Number: _____ Dated: _____ Signature: _____

Addendum Number: _____ Dated: _____ Signature: _____

Addendum Number: _____ Dated: _____ Signature: _____