

Idaho

The following employee of the State of _____ is being offered as a member of the Evaluation Committee:

Name: _____
 Title: _____
 Address: _____

 Email: _____
 Phone: _____
 Fax: _____

VI. PARTIES TO THIS AGREEMENT

The parties to this Agreement have affixed their signatures below in witness and in execution of this Intent to Participate, this 15th day of January, 2004.

Mark Little, IT Purchasing Officer
Printed Name and Title



Signature

FAX, MAIL OR EMAIL TO:

Eluid Martinez
Office of the State Purchasing Agent,
P. O. Drawer 26110,
Santa Fe, New Mexico 87502-0110
Fax: 505-827-2484
Email: eluid.martinez@state.nm.us
Phone: 505-827-0493