# **REFERENCE FORM**

Each proponent is requested to provide three (3) references from clients who have obtained similar goods or services to those requested in the RFP from the Proponent in the last [\*\*Insert no. of years\*\*].

### Include Government reference

#### Reference #1

| Company Name:                                       |              |      |
|---|--------------|------|
| Company Address:                                    |              |      |
| Contact Name:                                       |              |      |
| Contact Telephone Number:                           |              |      |
| Contact Email:                                      |              |      |
|   |              |      |
| Period of Performance:                              | Start:       | End: |
| Period of Performance:<br>Total Contract Value:     | Start:<br>\$ | End: |
|   |              | End: |
| Total Contract Value:                               |              | End: |
| Total Contract Value:<br>Geographical Area Covered: |              | End: |

## Reference #2

| Company Name:                                       |              |          |
|---|--------------|----------|
| Company Address:                                    |              |          |
| Contact Name:                                       |              |          |
| Contact Telephone Number:                           |              |          |
| Contact Email:                                      |              |          |
|   | <b>A</b> 1 1 | <b>—</b> |
| Period of Performance:                              | Start:       | End:     |
| Total Contract Value:                               | Start:<br>\$ | End:     |
|   |              | End:     |
| Total Contract Value:                               |              | End:     |
| Total Contract Value:<br>Geographical Area Covered: |              | End:     |

# Reference #3

| Company Name:               |        |      |
|-----------------------------|--------|------|
| Company Address:            |        |      |
| Contact Name:               |        |      |
| Contact Telephone Number:   |        |      |
| Contact Email:              |        |      |
| Period of Performance:      | Start: | End: |
| Total Contract Value:       | \$     |      |
| Geographical Area Covered:  |        |      |
| Scope of Services Provided: |        |      |
|                             |        |      |
|                             |        |      |