

Project Title: **Amador County Dependency Representation**

RFP Number: **CFCC-012414-ACDR-CF**

Proposer: _____

**Attachment 8
Lot Check-Off Form**

1. The attached proposal is for the following lot (check one box only):

<input type="checkbox"/>	Lot 1	<u>Sole practitioner</u> : Sole practitioner representing a specified number of clients, either parents or children, or both. The minimum number of clients to specify in the application is 30.
<input type="checkbox"/>	Lot 2	<u>Partnership or Organization</u> : Partnership, non-profit organization, or other configuration representing a specified number of clients, either parents or children, or both. The minimum number of clients to specify in the application is 60.

2. In addition to the above lot, the applicant has also submitted proposals for the following lots (check all boxes that apply):

<input type="checkbox"/>	Lot 1	<u>Sole practitioner</u> : Sole practitioner representing a specified number of clients, either parents or children, or both. The minimum number of clients to specify in the application is 30.
<input type="checkbox"/>	Lot 2	<u>Partnership or Organization</u> : Partnership, non-profit organization, or other configuration representing a specified number of clients, either parents or children, or both. The minimum number of clients to specify in the application is 60.