ATTACHMENT 6 CUSTOMER REFERENCE FORM

CCPOR APPLICATION DEVELOPMENT

Please provide at least three (3) references for implementations that most closely reflect work on similar projects to the scope outlined in this RFP within the past five (5) years. Please use the following format in submitting references.

Please note: The contact person should be an employee of the reference. The reference **will** be contacted in within one (1) week of the proposal due date.

| REFERENCE 1: GENERAL BACKG | ROUND | |
|---------------------------------|----------|--------|
| Name of Agency or Company: | | Phone: |
| Address: | | |
| Project Manager/Contact: | | |
| Customer Since: | <u> </u> | |
| Summary of Project: | | |
| | | |
| Reason for Selection/Relevancy: | | |
| Reason for Scientism Relevancy. | | |
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| REFERENCE 2: GENERAL BACKG | | Phone: |
| Address: | | |
| Project Manager/Contact: | | |
| Customer Since: | <u> </u> | |
| Summary of Project: | | |
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| Reason for Selection/Relevancy: | | |
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| Summary of Project: | | | |
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| Reason for Selection/Relevancy: | | | |
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