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| **Letter of Interest Cover Letter** |
| **Lead Organization:** |
| **If a Consortium, Consortium Member Organizations:** |
| **Lead Organization Street Address:** |
| **Lead Organization Mailing Address:** |
| **Virtual Services Offered:** |
| **Groups for which Virtual Services are Offered (1, 2, and/or 3)** |
| **Certification**  I acknowledge that I have read and understand the requirements of the RFI and am prepared to implement the services specified in this Letter of Interest on behalf of my organization and any other vendors included in the Letter of Interest. I certify that the proposed services are in compliance with the RFI requirements. I also certify that I am authorized to sign this Letter of Interest. This Letter of Interest is firm for a period of at least ninety (90) days from the deadline for RFI submission.  **I affirm that no employee of WWA nor its members has any financial or other interest in the organization(s) submitting this Letter of Interest.** |
| **Name Title Address City State Zip Phone E-Mail Signature** |