

SIGNATURE PAGE

P-28-2021

To the Monmouth County Board of County Commissioners:

**THE UNDERSIGNED HEREBY DECLARES THAT
I (WE) HAVE CAREFULLY EXAMINED THE SPECIFICATIONS.
I (WE) HEREBY CERTIFY PRICES QUOTED ARE IN ACCORDANCE
WITH YOUR REQUIREMENTS.**

Company Name: Witt O'Brien's, LLC
(PRINT)

Preparer's Name: Jonathan Hoyes
(PRINT)

Signature: _____ **March 30, 2021**
(DATE)

Address: 1201 15th St NW, Suite 600
Washington DC, 20005

Telephone No.: 202 585 0780

Fax No.: 202 580 8877

E-Mail Address: contractrequests@wittobriens.com
***** (This should be the email where Contracts would be sent) *****

Contact Person: Jonathan Hoyes

FEIN: [REDACTED]
(Federal Employee ID)

(Revised 2/2017)

PROPOSAL SHEET

**FINANCIAL AND PROGRAM MANAGEMENT SERVICES FOR THE
EMERGENCY RENTAL ASSISTANCE PROGRAM (ERAP)
AS A PROFESSIONAL SERVICE**

RFP #P-28-2021

The undersigned hereby declare that they have carefully examined the specifications covering the FINANCIAL AND PROGRAM MANAGEMENT SERVICES FOR THE EMERGENCY RENTAL ASSISTANCE PROGRAM (ERAP) AS REQUIRED BY THE COUNTY OF MONMOUTH and shall contract to furnish and deliver all the services in this specification in the manner prescribed therein.

<u>DESCRIPTION</u>	<u>TOTAL COST</u>
Financial and Program Management Services:	<u>\$1,265,500</u>

Proposals will not be accepted unless signed by the owner or authorized corporate officer.

Respectfully submitted, Jonathan Hoyes, Senior Managing
NAME OF AUTHORIZED CORPORATE OFFICER: Director - Government Solutions
(TYPED OR PRINTED)

SIGNED: Jonathan Hoyes

ADDRESS: 1201 15th St NW, Suite 600, Washington DC 20005

PHONE: 202 585 0780

FAX NUMBER: 202 580 8877

CONTACT E-MAIL: contractrequests@wittobriens.com, jhoyes@wittobriens.com

BILLING E-MAIL: contractrequests@wittobriens.com

TAX ID NUMBER: [REDACTED]

PLEASE INCLUDE A COPY OF YOUR W-9.