

Records Management Support Services

ITEM

VENDOR RESPONSE

| Customer Reference #1 | |
|---|--|
| Name | |
| Number of employees | |
| Contact name | |
| Contact title | |
| Contact telephone number | |
| Contact e-mail address | |
| Products and services provided by vendor | |
| First date of business relationship with vendor | |
| Completion/go live date | |
| Applicability of this reference | |
| Customer Reference #2 | |
| Name | |
| Number of employees | |
| Contact name | |
| Contact title | |
| Contact telephone number | |
| Contact e-mail address | |
| Products and services provided by vendor | |
| First date of business relationship with vendor | |
| Completion/go live date | |
| Applicability of this reference | |

