

Attachment A - REVISED

Spokane International Airport  
Request for Proposals for  
Marketing and Advertising Services

**PROPOSAL INFORMATION FORM**

Name of Proposing Firm:	Contact Individual's Name:
Address of Contact Individual:	
Phone Number of Contact Individual:	E-mail Address of Contact Individual:
State of Washington UBI Number:	
Receipt is hereby acknowledged of Addenda No(s): _____	

**OFFICIAL AUTHORIZED TO SIGN FOR PROPOSER:**

"I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct":	
Signature:	Date:
Print Name and Title	Location or Place Executed: (City, State)

Note: This Proposal Information Form must be completed and submitted as part of your Proposal.

