**Attachment K**

**Request for Proposals Form for Submission of Questions**

| **CONSULTANT NAME:** |  |
| --- | --- |

 **RFP Number: FS-2020-07-RL**

|  | Your Organization’s Name: |  |  |
| --- | --- | --- | --- |
| # | Solicitation Reference | Question | Response |
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**END OF ATTACHMENT K**