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OFFICE OF PUBLIC ACCOUNTABILITY
PROCUREMENT APPEALS

Appendix D: Hearing Request/Waiver Form
PROCUREMENT APPEAL

DATE: 8/1/18
TIME: 2:05 AM PM BY: JH
FILE NO OPA-PA: 18-005

In the Appeal of)
TakeCare Insurance Company, Inc.)
(Name of Company), APPELLANT)
_____)

HEARING
REQUEST/WAIVER

Docket No. OPA-PA _____

Please select one:

Pursuant to 2 GAR § 12108(a), the undersigned party does hereby request a hearing on the appeal stated above.

Pursuant to 2 GAR § 12108(a), the undersigned party does hereby waive his/her right to a hearing and is submitting the appeal stated above on record without a hearing.

Submitted this 31 day of July, 2018.


By: (Please select one)

APPELLANT

Chief Procurement Officer

Director of Public Works

Head of Purchasing Agency


Signature

David Mair
Print Name

ORIGINAL