PRE-BID CONFERENCE RESPONSE FORM WEDNESDAY, FEBRUARY 19, 2025 – 1:00 PM

Solicitation Number BPM048350

MHBE Kong Mesh Subscription

Return via e-mail this form to the Procurement Officer (Tracey D. Gamble) by Thursday, February 13, 2025:

	Maryland Health Benefit Exchange
	750 East Pratt Street, 6 th Floor
	Baltimore, MD 21202
	Email: tracey.gamble1@maryland.gov
Please indicate	:
Yes, the follow ADDRESS):	ing representatives will be in attendance: (PLEASE PROVIDE NAME AND EMAIL
1.	
2.	
3.	
No, we will not	be in attendance.
Please specify v	whether any reasonable accommodations are requested:
Signature	Title
Name of Firm (please print)