**APPENDIX O**

 **(NOTICE OF INTENT TO SUBMIT PROPOSAL)**

By voluntarily completing and submitting this Notice of Intent to Submit Proposal (Notice), Proposer is expressing its intent to submit a Proposal in response to the solicitation identified below. Proposer is not required to complete this Notice in order to submit a Proposal; and, Proposer’s completion of this Notice does not mandate that Proposer shall submit a Proposal. The information provided in this Notice will be used by County to plan the evaluation component of the solicitation.

|  |  |
| --- | --- |
| Title of Solicitation | Click here to enter text. |
| Solicitation Number | Click here to enter text. |
| Proposer’s Legal Name | Click here to enter text. |
| Authorized Representative’s Name | Click here to enter text. |
| Title | Click here to enter text. |
| E-mail | Click here to enter text. |
| Phone Number | Click here to enter text. |
| Signature |  |
| Date | Click here to enter a date. |

Submit the completed Notice by the due date indicated in Subparagraph 7.3 (RFP Timetable) of the solicitation document to the following address (please use only one (1) method to send the Notice):

**E-mail Address:**

tsp2223rfp@ad.lacounty.gov

**Postal and Delivery Address:**

County of Los Angeles

Aging and Disabilities Department

Contracts Management Division

Attention: NF-TSP-2223 RFP

510 S. Vermont Avenue, 11th floor

Los Angeles, CA 90020