

**Attachment 2. Pre-Bid/Proposal Conference Response Form**

Solicitation Title: Investment Advisor  
Solicitation #: MD529-FY27-001  
Bidder/Offeror Name: \_\_\_\_\_

See the Key Information Summary Sheet for the date and time for the Pre-Bid/Pre-Proposal Conference.

Please return this form by the due date noted for the RSVP, advising whether or not your firm plans to attend. The completed form should be returned via e-mail to the Procurement Officer at the contact information below:

Kris Chewlin, STO  
Email: [kchewlin@treasurer.state.md.us](mailto:kchewlin@treasurer.state.md.us)

Please indicate:

\_\_\_\_\_ Yes, the following representatives will be in attendance.  
Attendees (maximum of 3 per company):  
1.  
2.  
3.

\_\_\_\_\_ No, we will not be in attendance.

Please specify whether any reasonable accommodations are requested :

Bidder: \_\_\_\_\_  
*(Bidder Name Please Print or Type)*

By: \_\_\_\_\_  
*(Signature/Seal)*

Printed Name: \_\_\_\_\_  
*(Printed Name)*

Title: \_\_\_\_\_  
*(Title)*

Date: \_\_\_\_\_  
*(Date)*

**Directions to the Pre-Bid Conference**

*The Pre-Proposal Conference will be held virtually via Microsoft Teams. Vendors who RSVP will be sent an invite link to the conference.*