Exhibit B

Questionnaire and Information Form

OFFEROR QUESTIONNAIRE AND INFORMATION FORM

BUSINESS AND CONTACT INFORMATION				
Business Name:		F	Federal Tax ID #	
Address:City/State/Zip:				
Contact Nam	ne:	Phone #:	Fax #:	
E-Mail:	,	Web Site:		
Number of Y	ears been in Business:			
Type of Busi	ness Entity: Corporation	LLC LP LP Other		
In What State	e & Year Did Business Organ	ize in Your Current Structure:		
Full Legal N	ame of Parent or Holding Cor	npany, if any:		
(Note: if the	ere are several tiers of owners	hip, attach a corporate organizational	chart)	
Services Pro	vided by Business:			
	CON	TRACT INFORMATION/PERFORM	MANCE	
In the next th	mag (2) yaama haa Dyaimaga			
-	ree (3) years, has Business:	on? Yes No If yes, attach exp	Manation	
		as awarded? Yes \square No \square If no, at		
	•	rly completion of work? Yes \square No		
		s \square No \square If yes, attach details.	. If yes, attach details.	
		nages? Yes No I If yes, attach d	lotaile	
(6)	been assessed fiquidated dan	nages: Tes [] No [] II yes, attacii u	ictalis.	
other docume and has deter equipment, n	ents herein; (b) that through it rmined the amount and charac	ts authorized personnel it has personate of the proposed work and the suple in compliance with the specification	Terms and Conditions, Scope of Work, and all ally examined the location of the proposed work pervision, labor, tools, material as identified, and ons and contract documents (if applicable); and	