



St. John the Baptist Parish

RFP 2020.02 – PROPERTY and CASUALTY INSURANCE

Addendum #2

This addendum is issued to provide a copy of Attachment 1.5, Casualty Policy.

See attachment 1.5.

Please type or print legibly information below.

Proposer hereby acknowledges receipt of ADDENDUM #2. This form MUST be included in your submittal.

PROPOSER INFORMATION

Firm Name: _____

Address: _____ City/State/Zip: _____

Phone No.: _____ Fax No.: _____

AUTHORIZATION TO PROPOSE (must be signed):

By: _____
Signature Offer Date Printed Name