## ATTACHMENTS <u>APPENDIX II – Statement of No Participation</u>

## Statement of No Participation.

Specifications

If, for any reason, you are unable or unwilling to participate in this Request for Proposals at this time, please complete and return this Statement of No Participation to the e-mail <a href="Purchasing@HCSO.Tampa.FL.US">Purchasing@HCSO.Tampa.FL.US</a> or by fax at (813) 242-1826. Your choices or comments below will assist us in properly notifying you of future opportunities.

Nature of Award

		_
Specifications are too "tight" (i.e., limited to one brand or		Insufficient time was provided for response
manufacturer)	L	
— Unable to meet specifications		Product or an equivalent is not offered
—— Specifications	are unclear	— Other
Please provide an explanation:	_	
<del></del>		
We request to:  Remain on H	CSO's list for future	Be removed from HCSO's list for
— solicitations i	n this service	— future solicitations in this service
category		category
Company Name:		
Officer Name and Title:		
Address:		
City:	State:	Zip Code:
Office Phone:	Mobile Phone:	Fax:
E-Mail Address:		
Signature of Officer:	Da	ite: