

**STATE OF INDIANA IVOSB SUBCONTRACTOR COMMITMENT FORM**

**RFP#: 21-2721**

**DUE DATE: December 1, 2020**

**TOTAL BID AMOUNT:**  
**\$3,353,455.38 over 5 yrs., with no options for IVOSB subcontractors**

<b>Company Name:</b> No IVOSB subcontractor commitment	<b>Contact Person:</b>	
<b>Address:</b>	<b>E-mail:</b>	
<b>Sub-Contract Amount:</b>	<b>Telephone Number:</b> ( )	<b>Fax Number:</b> ( )
<b>Sub-Contract Percentage of Total Bid:</b>	<b>Describe service/product to be provided and how this is a Valuable Scope Contribution of the Contract:</b>	
<b>Provide approximate dates when Sub-Contractor will perform on this project:</b>		

<b>Company Name:</b>	<b>Contact Person:</b>	
<b>Address:</b>	<b>E-mail:</b>	
<b>Sub-Contract Amount:</b>	<b>Telephone Number:</b> ( )	<b>Fax Number:</b> ( )
<b>Sub-Contract Percentage of Total Bid:</b>	<b>Describe service/product to be provided and how this is a Valuable Scope Contribution of the Contract:</b>	
<b>Provide approximate dates when Sub-Contractor will perform on this project:</b>		

LexisNexis Risk Solutions FL Inc.  
 Respondent Firm  
 1000 Alderman Dr.  
 Address  
 Alpharetta, GA 30005  
 City/State/Zip Code  
 Deborah Smith, Account Manager  
 Representative  
 Dec. 1, 2020  
 Date

214-212-5180  
 Telephone Number  
 N/A  
 Fax Number  
 Deborah.Smith@lexisnexisrisk.com  
 Email Address  
  
 Authorizing Signature  
 Micah Asch, Manager, Proposal Development  
 Printed Name and Title

Please check if additional forms are attached.

**FORM MUST BE COMPLETED IN ITS ENTIRETY WITH COMPLETED LETTERS OF COMMITMENT**