ATTACHMENT 4



QUESTIONS TEMPLATE RFP entitled "CLINICAL LABORATORY SERVICES"

Offeror Name: ____

Question Number	RFP Page #	Section Reference	Question

An Offeror is required to use the **Questions Template** table above when submitting questions in response to the Request for Proposals entitled Clinical Laboratory Services. Offeror's questions must be submitted to the Designated Contact at the address specified in this RFP.