

**Exhibit I.J – Notice of Bidding Intention Form**

**NYS Department of Civil Service  
RFP No. 2014MH-1  
entitled  
“Mental Health and Substance Abuse Program for the  
Empire Plan, Excelsior Plan, Student Employee Health Plan”**

**Notice of Bidding Intention Form**

\_\_\_\_\_

(Please PRINT Firm's Name Above)

With regard to this RFP, (check one of the following boxes applicable):

- We **ARE INTERESTED & MAY** submit a bid response.
- We **ARE NOT INTERESTED & WILL NOT** be submitting a bid response because:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**INTEREST IN M/WBE SUBCONTRACTING POSTING:**

(Check box if applicable)

- Our firm is a NYS certified M/WBE interested in a subcontracting opportunity. Please add our firm's contact information, indicated at the top of this Form, to the list of certified M/WBE subcontractors that have expressed interest in this Procurement. The list will be posted on Department's web page for this Procurement. The NYS M/WBE certification documentation for our firm is attached

\_\_\_\_\_  
Name of Contact at Firm

\_\_\_\_\_  
Title

\_\_\_\_\_  
Email Address

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

Complete the tables above and submit it to the MHSA Program Procurement Manager specified in RFP, Section II.A.2.b. The completed table may be emailed, faxed and/or mailed (see addresses provided in RFP, Section II.A.2.b.).