ATTACHMENT 11

As stated in Section 2 of this RFP, an Offeror is encouraged to use New York State



Offeror Name: __

New York State Subcontractors and Suppliers RFP entitled: "Patient Protection and Affordable Care Act Compliance Services"

Name(s) of New York Subcontractors and/or Suppliers	Address, City, State, and Zip Code	Description of Services or Supplies Provided	Estimated Value Over 1-Year Contract Period	Identify if Subcontractor and/or Supplier