



**City of East Providence, RI  
Division of Purchasing**

Electronic Bid Document Notification of Receipt

*The undersigned hereby acknowledges electronic receipt of the bid documents for the procurement specified below.*

**From:**

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Bid No.: \_\_\_\_\_

Title of Specification received: \_\_\_\_\_

Date: \_\_\_\_\_

Please Fax to 401-435-7726 City of East Providence, Division of Purchasing