

LETTER OF INTENT - GOODS AND SERVICES

Name of Concession:				
Name of Concessionair	e:			
Address:				
City:	State:		Zip:	
Name of ACDBE Firm:				
Address:				
City:	State:		Zip:	
Telephone:		Email:		
The Concessionaire is c	ommitted to purchasing t	he goods or services fro	m the ACDBE as descril	ped above.
The estimated percenta	age of this purchase is	% of total pu	rchases.	
AFFIRMATION The above-named ACDB stated above.	E firm affirms that it will p	perform the portion of th	ne contract for the esti	mated dollar value as
Ву:				
Concessionaire	Signature	Title		Date
Ву:				
ACDBE Signatur	re			 Date

For Questions: DEN Commerce Hub | (303) 342-2185 | mark.white@flydenver.com

