DATE: July 31, 2013

TO: All Prospective Bidders   Cc: Procurement File

FROM: Mallela Ralliford

ADDENDUM #2

The following amends the above referenced Bid documents. Receipt of this addendum must be acknowledged by completing the enclosed "Acknowledgement of Receipt of Addenda" form and submitting it along with the Technical Offer you return to the University.

The due date and time for the Bid to be submitted to the University remains as **TUESDAY AUGUST 6, 2013 by 2:00 p.m.** to the issuing office.

A. **ADDITION**: Sheet TQ-6.80 Music Faculty Office A/V Signal Flow:
   - Added note to sheet to clarify locations that diagram applies to and is available here: https://umbc.box.com/DrawingTQ

B. **REVISIONS**:

1. The “Bid Price Sheet” has been updated and is available here: https://umbc.box.com/BidPriceSheet-Revised
2. Specification 27 41 00 AV Systems
   - Only Page 67, section P updated to clarify office locations and is available here: https://umbc.box.com/Div1AVSystems

Enclosure: Acknowledgement of Receipt of Addenda Form
Specification 27 41 00 AV Systems (UPDATED)
Bid Price Sheet (UPDATED)

END OF ADDENDUM #2 DATED 07/31/13
This Addendum was posted on the University’s eBid Board
and was submitted to eMaryland Market on 07/31/13; emailed to bidder on 07/31/13
(Originals with enclosures were not mailed)
BID NO.: BC-20888-R

BID DUE DATE: TUESDAY, AUGUST 6, 2013 AT 2:00 P.M.

BID FOR: UMBC PAHB II – AV CLASSROOM SYSTEMS

NAME OF BIDDER: ____________________________________________

ACKNOWLEDGEMENT OF RECEIPT OF ADDENDA

The undersigned, hereby acknowledges the receipt of the following addenda:

Addendum No. 1    dated 07/30/13
Addendum No. 2    dated 07/31/13
Addendum No. ____    dated ________
Addendum No. ____    dated ________
Addendum No. ____    dated ________

As stated in this Addendum, this form is to be returned with your Bid Price Sheet.

________________________________________
Signature

________________________________________
Printed Name

________________________________________
Title

________________________________________
Date

END OF FORM