

REQUEST FOR PROPOSAL 26-85248
CORRECTIONAL HEALTH CARE

ATTACHMENT U
PRE-PROPOSAL NETWORK OPPORTUNITIES FORM

Instructions: Fill in the blank cells below with the requested information. Forms should be submitted via email to rfp@idoa.in.gov per RFP Section 1.24.

The subject line of the email submissions must clearly state the following:
“[RFP 26-85248 Attachment U– *[INSERT COMPANY NAME]*]”.

This is an optional form.

Company Name	CHS IN, LLC d/b/a YesCare
MBE/WBE/IVOSB (if applicable)	N/A
Company Address	205 Powell Place, Brentwood, TN 37027
Contact Name and Title	Dana Bell, Chief Development Officer
Contact Telephone	318-426-8264
Contact Email	Marketemail@yescarecorp.com