DATE: June 4, 2020

TO: All Prospective Proposers

FROM: Sharon Barry  
Director, Procurement and Business Affairs  
301-985-7156

Phan Truong  
Senior Buyer, Technology Procurement  
301-985-7143

RE: RFP 91786 – Employee Survey Services  
Addendum #2 dated 06/04/2020

The following revises the above referenced RFP documents. Receipt of this addendum is to be acknowledged by completing the enclosed "Acknowledgement of Receipt of Addenda Form” and returning it, via email, to the Ordering Office contacts listed in the solicitation.

1. The Solicitation Schedule, on page 2 of the RFP is being revised to the following schedule.

**SOLICITATION SCHEDULE**

<table>
<thead>
<tr>
<th>Issue Date:</th>
<th>Tuesday, April 14, 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last Day for Questions:</td>
<td>Tuesday, May 5, 2020 by 2:00PM ET</td>
</tr>
<tr>
<td>Technical Proposal Due Date:</td>
<td>Thursday, May 28, 2020 by 2:00PM ET</td>
</tr>
<tr>
<td>Oral Presentation via Zoom:</td>
<td><strong>June 24 – June 30, 2020</strong></td>
</tr>
<tr>
<td>Price Proposal Due Date:</td>
<td>Thursday, July 9, 2020 by 2:00PM ET</td>
</tr>
<tr>
<td>BAFO Price Proposal Due Date</td>
<td>TBD</td>
</tr>
<tr>
<td>Contractor(s) Selection Anticipated to be Finalized:</td>
<td><strong>Tuesday, July 30, 2020</strong></td>
</tr>
<tr>
<td>Contract Commencement:</td>
<td>Monday, August 17, 2020</td>
</tr>
</tbody>
</table>

End of Addendum Two dated 06-04-2020
ACKNOWLEDGEMENT OF RECEIPT OF ADDENDA FORM

RFP NO.: 91786

RFP FOR: Employee Survey Services

NAME OF PROPOSER: __________________________________________

ACKNOWLEDGEMENT OF RECEIPT OF ADDENDA

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

Addendum No.  1       dated  05-12-2020
Addendum No.  2       dated  06-04-2020
Addendum No. _______ dated _______
Addendum No. _______ dated _______
Addendum No. _______ dated _______

As stated in the RFP documents, this form is included in our Technical Proposal.

________________________________________
Signature

________________________________________
Name Printed

________________________________________
Title

________________________________________
Date

END OF FORM