	<u>Proposal</u>	Date Bid	<u>Bidder</u>	Contact Person			RFP Start	RFP End
RFP No.	Due Date	Received	FEIN/SSN	<u>Legal Name of Bidder</u>	<u>Name</u>	<b>Contact Person Email</b>	<u>Date</u>	<u>Date</u>
		4/3/2023	54-1752058	School Based Health Alliance	Paula Fields	info@SBH4all.org	9/1/23	12/31/24
		4/6/2023	95-2557063	Public Health Foundation Enterprises Inc dba Heluna Health	Peter Dale	contracts@helunahealth.org	9/1/23	12/31/24