



Name of Concession/vendor firm: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ E-mail address: _____

Name of ACDBE Firm: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ E-mail address: _____

Description of Goods and Services or work to be performed by ACDBE firm:

The Concessionaire is committed to utilizing the above named ACDBE for the goods and services or work described above. The estimated dollar value of this work is \$ _____.

AFFIRMATION:

The above-named ACDBE firm affirms that it will perform the portion of the contract for the estimated dollar value as stated above.

By: _____
Concessionaire Signature Title Date

By: _____
ACDBE Signature Title Date

For Questions or to Return Documents:

Denver International Airport
ATTN: Mark White
DEN Commerce Hub
Airport Office Building | 9th Floor
8500 Peña Boulevard | Denver, CO 80249-6340
303-342-2185 | mark.white@flydenver.com

