Mayor's Office of Economic Development & Office of Waikiki Development HTA-CPEP Administration Attachment D

Proposal Receipt Form

Name of Proposal_____

In Person Delivery

Date Delivered_____

Person Delivering the Proposal_____
Name and Telephone Number

Person Receiving the Proposal_____
Name and Telephone Number

Time Delivered_____
Time Stamp

Delivery by Mail

Date Received_____
Time Stamp

Person Receiving the Proposal_____
Name and Telephone Number

Return Receipt to_____

_____
Name and Mailing Address