

# DEPARTMENT OF MENTAL HEALTH

State of Mississippi

239 North Lamar Street  
1101 Robert E. Lee Building  
Jackson, Mississippi 39201



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Diana S. Mikula - Executive Director

October 27, 2020

**DEPARTMENT OF MENTAL HEALTH**  
**AMENDMENT #1**  
**IFB#: 3160003934**  
**for**  
**Comprehensive Communication Campaign for Opioid Awareness**

Dear Prospective Bidders:

Reference is made to our Invitation for Bid #3160003934 for Comprehensive Communication Campaign for Opioid Awareness for the MS Department of Mental Health dated October 16, 2020. This letter will serve to acknowledge that the IFB is amended to include the highlighted changes to Attachment A Bid Cover Sheet. All other terms, conditions, and specifications of this solicitation remain unchanged.

Bid Opening Date and Time: November 17, 2020 at 10:00 a.m. CST

Issued by: Toni Johnson, Director  
Bureau of Human Resources  
601-359-6244

**ACKNOWLEDGEMENT**

This amendment must be signed and returned with your bid, or otherwise acknowledged prior to the opening date and time shown above. If you have already submitted your bid and need to make corrections, submit a corrected bid with this amendment prior to the opening date and time shown above.

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

# Attachment A

## Bid Cover Sheet

The Department of Mental Health is seeking to establish a contract for a Comprehensive Communications Campaign for Opioid Awareness for the MS Department of Mental Health.

Bids are to be submitted as listed below, on or before November 17, 2020 at 9:00 a.m.

**PLEASE MARK YOUR ENVELOPE:**

[IFB: #3160003934:]

Opening Date: November 17, 2020 at 10:00 a.m.

MS Department of Mental Health

Attention: Toni Johnson

239 North Lamar Street

Jackson, MS 39201

**SEALED BID – DO NOT OPEN**

Name of Company: \_\_\_\_\_

Quoted By: \_\_\_\_\_

Signature: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Company Representative: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

FEI/FIN # (if company, corporation, or partnership):	
SS# (if individual):	