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STATE OF CONNECTICUT - AGENCY VENDOR FORM IMPORTANT: ALL Parts Of This Form Must Be Completed, Signed And Returned By The Vendor. READ & C C OMPLETE AREFULLY SP-26NB-IPDF Rev. 4/10 COMPLETE VENDOR LEGAL BUSINESS NAME Taxpayer ID # (TIN): SSN FEIN WRITE/TYPE SSN/FEIN NUMBER ABOVE BUSINESS NAME, TRADE NAME, DOING BUSINESS AS (IF ... 4th, 2024

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#### **FORMS APPENDIX Forms Appendix**

WB-44 Counter-Offer WB-46 Multiple Counter-Proposal WB-42 Amendment To Listing Contract WB-40 Amendment To Offer To Purchase WB-41 Notice Relating To Offer To Purchase WB-45 Cancellation Agreement & Mutual Release WB-24 Option To Purchase WB-25 B 2th, 2024

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