

Delaware Health and Social Services

HSS-15-038

REQUEST FOR PROPOSALS FOR PROFESSIONAL SERVICES REPRESENTATIVE PAYEE FOR ADULTS ISSUED BY DIVISION OF SUBSTANCE ABUSE & MENTAL HEALTH

Attendance Sheet

July 9, 2015

1:00 PM

****Please Be Sure to Provide a Business Card****

NAME	ORGANIZATION/ADDRESS	E-MAIL ADDRESS	PHONE NUMBER	MWBE
SHUSHMA SHAH	PATHWAYS BEHAVIORAL	sshah@drwies.org	267 940 5001	/
D. ERIC SAUL	SODAT	esaul@sodatdelaware.com	302-656-4044	
Kristen Blanchard	SODAT	kblanchard@sodatdelaware.com	302 405 6404	
Amy SAUL	MIDCOAST COMMUNITY BANK	ASAU@MIDCOASTBANK.COM	302-250-4499	
Ray Brouillette	Easter Seals DE	RBrouillette@esdel.org	302.324.4444	
Bryce Hewlett	MHASP 1211 Chestnut St. 11th fl. Philadelphia PA 19107	bhewlett@mhasp.org	267 320 1306	

*** If your organization is certified as a Women or Minority Owned Business, please put a checkmark in the far right box, next to your phone number.***

D. Eric Saul, MBA
Executive Director



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Director, Business Development

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