Attachment D

2024-PRMP-MES-AVS-005

Terms for Filing an Administrative Review / 3 LPRA Section 9659

To file an application for administrative review according to 3 L.P.R.A Section 9659, the respondent must fill out and submit this form during the period established in Section 1.3: RFP Schedule of Events. If the form is not received during the period established in Section 1.3: RFP Schedule of Events, the application for review will not be considered. This form must be **hand delivered** in person or by courier to the following address:

Puerto Rico Department of Health
Office of Legal Affairs
Centro Médico Edificio A
Antiguo Hospital de Psiquiatría
San Juan PR 00936

This form, and any packaging that it is transmitted in, must clearly state on the outside of the package:

Application for Administrative Review for: RFP number 2024-PRMP-MES-AVS-005

I _____ (respondent's legal name) representing _____ (company), hereby apply for review of 2024-PRMP-MES-AVS-005 awarded to _____ (entity), due to the following reasons:

Please explain and detail the reasons below:

_____
_____
_____
_____
_____
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_____

Representative Signature: _____

Date: _____