

Preferred Provider Recommendation

Your Name: \_\_\_\_\_

Category of work done: \_\_\_\_\_

Provider's Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_

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

Web Site: \_\_\_\_\_

Services Performed: \_\_\_\_\_

How is fee based? Per bid, per job, per hour: \_\_\_\_\_

Have you personally used this provider? \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Recommending person: \_\_\_\_\_

OK to list your name as the person making the recommendation? \_\_\_\_\_

Completed form can be returned to Office or Larian or it can be sent via email to [hhr.news@charter.net](mailto:hhr.news@charter.net)