# THE AMEREN ILLINOIS UTILITIES
# REQUEST FOR PROPOSALS FOR
# CAPACITY

## NOTICE OF INTENT TO BID

**Company:** _____

**Contact Name:** _____

**Address:** _____

_____

_____

**Telephone:** _____

**Facsimile:** _____

**E-Mail:** _____

**Signature:** _____

_____ _____

Title Date

Due By: Friday, February 29, 2008 at 5:00 pm CPT

Submit to Levitan & Associates, Inc., the Procurement Administrator via

Fax: 617-531-2826

E-Mail: AIURFP@levitan.com