



REQUEST FOR QUOTATION

PERSON REQUESTING QUOTE: _____ **EMAIL:** _____ **DEPARTMENT:** _____

PHONE: _____

Please quote price and delivery for the below requested goods or services. **ALL** blanks must be completed. In case of discrepancy between Unit Price and Total, the Unit Price shall be considered correct.

Indicate Contract reference and/or Education Discount provided: _____

Quote Line Number	DESCRIPTION OF GOODS OR SERVICES	QUANTITY	UNIT of MEASURE (ea, cs, dz, hr, etc.)	UNIT PRICE	TOTAL AMOUNT	Date for Delivery or Completion of Services	Lead Time # of days after receipt of order
1							
2							
3							
4							
5							
6							
7							
8	SHIPPING COSTS						
9	GRAND TOTAL* (Current applicable sales tax will be added when Purchase Order is issued)						

Special requirements (if any): _____

Attach additional pages with information as needed

All blanks below to be completed by vendor

COMPANY: _____ **ADDRESS** _____

CITY, STATE, ZIP _____ **PHONE #** _____ **EMAIL** _____

AUTHORIZED AGENT (PRINTED NAME): _____ **TITLE** _____

SIGNATURE: _____ **DATE:** _____

VENDOR QUOTE # _____ **PRICES GOOD THROUGH** _____

PLEASE RESPOND TO THIS QUOTE BY (DATE AND TIME): _____

Late responses will not be accepted