

REQUEST FOR QUOTES

Southeastern Regional School District

| Requisition #: | | | |
|---|-------------------|-------------------------------|--------------------|
| P.O. #: | | | |
| PURCHASE DESCRIPTION AND CONTRACT TERMS: | | | |
| QUALITY REQUIREMENTS: Best – | | | |
| VENDORS CONTACTED | Total Price Quote | Unit Price(s) (if applicable) | Notes |
| Company/Address Date: Phone: Solicited by: | | | See quote attached |
| Company/Address Date: Phone: Solicited by: | | | See quote attached |
| Company/Address Date: Phone: Solicited by: | | | See quote attached |
| RECOMMENDATION: | | | |
| Name: | | Department: | |
| Signature: | | Date: | |