

FREDERICKSBURG INDEPENDENT SCHOOL DISTRICT

PRODUCT/SERVICE QUOTATION FORM

This form must be completed for the following purchase amounts:

- \$49,999.99 and below, from vendors who are not on a purchasing cooperative (Buyboard, TIPS, Omnia Partners, etc.)
- Over \$50,000.00 from vendors on a purchasing cooperative.

Reference: [FISD Purchasing Levels & Requirements](#)

Department: \_\_\_\_\_

District Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Product(s)/Service(s) Requested: \_\_\_\_\_

Product(s)/Service(s) Needed For: \_\_\_\_\_

Product/Service Description(s)  
Including Brand Name, Model and Quantity: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1) Company Contacted: \_\_\_\_\_  
Name of Person Contacted: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Price(s): \_\_\_\_\_  
Freight: \_\_\_\_\_  
Written Quote Received: \_\_\_\_\_ Yes (attached) \_\_\_\_\_ No  
Availability and Terms: \_\_\_\_\_  
\_\_\_\_\_

2) Company Contacted: \_\_\_\_\_  
Name of Person Contacted: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Price(s): \_\_\_\_\_  
Freight: \_\_\_\_\_  
Written Quote Received: \_\_\_\_\_ Yes (attached) \_\_\_\_\_ No  
Availability and Terms: \_\_\_\_\_  
\_\_\_\_\_

3) Company Contacted: \_\_\_\_\_  
Name of Person Contacted: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Price(s): \_\_\_\_\_  
Freight: \_\_\_\_\_  
Written Quote Received: \_\_\_\_\_ Yes (attached) \_\_\_\_\_ No  
Availability and Terms: \_\_\_\_\_  
\_\_\_\_\_