

HERMON-DE KALB CENTRAL SCHOOL DISTRICT --- PURCHASE REQUISITION ATTACHMENT

NAME OF REQUISITIONER: _____ REQUISITION #: _____

FOR PURCHASES BETWEEN \$1,000 - \$1,500 - Two (2) Verbal Quotes Required:

1. _____
Vendor Date Amount

2. _____
Vendor Date Amount

REASON FOR **NOT** SELECTING LOWEST VENDOR QUOTE: _____

FOR PURCHASES BETWEEN \$1,501 - \$4,000 - Three (3) Verbal or Written Quotes Required:

1. _____
Vendor Date Amount

2. _____
Vendor Date Amount

3. _____
Vendor Date Amount

FOR PURCHASES BETWEEN \$4,001 - \$20,000 - Three (3) formal written quotes Required:

1. _____
Vendor Date Amount

2. _____
Vendor Date Amount

3. _____
Vendor Date Amount

REASON FOR **NOT** SELECTING LOWEST VENDOR QUOTE: _____

PURCHASES NOT BID/QUOTED DUE TO:

_____ Only vendor that supplies items _____ BOCES Bid _____ State Contract # _____

_____ Emergency situation - Explain _____

Please note that this form must accompany requisition for approval.