

BID TABULATION SHEET

For Purchases Over \$25,000

Bid Reviewer _____ Date of Bid _____

Budget Code _____ Required Delivery Date _____

Bid Close Date _____

GIVE A COMPLETE DETAILED DESCRIPTION OF SUPPLIES, EQUIP. NEEDED.

DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	TOTAL

(F.O.B. Destination)
Transportation Charges

TG VENDOR Company _____ Meet Requirements _____
 Address _____ Total Bid \$ _____
 _____ Delivery Date _____
 Telephone # _____ Preference/prompt pay _____ %
 Evaluation Total _____ Awarded to: _____

ED VENDOR Company _____ Meet Requirements _____
 Address _____ Total Bid \$ _____
 _____ Delivery Date _____
 Telephone # _____ Preference/prompt pay _____ %
 Evaluation Total _____ Awarded to: _____

OPEN MARKET Company _____ Meet Requirements _____
VENDOR Address _____ Total Bid \$ _____
 _____ Delivery Date _____
 Telephone # _____ Preference/prompt pay _____ %
 Evaluation Total _____ Awarded to: _____

The dollar amount indicated refers to the whole order including freight.

IN THE EVENT THAT THE LOW BID IS NOT ACCEPTABLE, INDICATE REASON BELOW.