

DATE: _____

BID AUTHORIZATION FORM

This form must be attached to your Purchase Order or Purchase Card Statement.

SCHOOL/DEPT: _____ NAME _____ PO# _____ CHECK# _____

ITEM #	DESCRIPTION OF ITEMS BEING ORDERED (Include Brand, Model and Specifications)	QUANTITY
1		
2		
3		
4		

CHECK ONE BOX BELOW

STATE CONTRACT VENDOR

VENDOR _____ STATE CONTRACT NUMBER _____

SOLE SOURCE VENDOR - SELECT FROM LIST BELOW

VENDOR _____

SOLE SOURCE VENDOR - NOT LISTED ABOVE

- 1. Complete Sole Source Justification box below.
- 2. Enter Vendor Information in VENDOR #1 BELOW

PURCHASING DEPARTMENT SIGNATURE _____

SOLE SOURCE JUSTIFICATION

VENDOR BIDS

VENDOR # 1 _____ CONTACT PERSON _____
PHONE # _____

ITEM # ABOVE	UNIT PRICE	PLEASE LIST ANY VARIATIONS TO THE DESCRIPTION OF ITEMS LISTED ABOVE
1		
2		
3		
4		

I HAVE AWARDED THE BID TO THIS VENDOR DATE _____

VENDOR # 2 _____ CONTACT PERSON _____
PHONE # _____

ITEM # ABOVE	UNIT PRICE	PLEASE LIST ANY VARIATIONS TO THE DESCRIPTION OF ITEMS LISTED ABOVE
1		
2		
3		
4		

I HAVE AWARDED THE BID TO THIS VENDOR DATE _____

VENDOR # 3 _____ CONTACT PERSON _____
PHONE # _____

ITEM # ABOVE	UNIT PRICE	PLEASE LIST ANY VARIATIONS TO THE DESCRIPTION OF ITEMS LISTED ABOVE
1		
2		
3		
4		

I HAVE AWARDED THE BID TO THIS VENDOR DATE _____

ADDITIONAL COMMENTS

OFFICE USE ONLY