



**SOUTHWEST INDEPENDENT SCHOOL DISTRICT
PURCHASING DEPARTMENT
PRICE QUOTE TABULATION**

Date: _____ Campus/Department: _____ Requisition#: _____

Description of item(s) for bid request: _____

**Quote is only needed for orders less than \$1,000. If total order is over \$1,000, 2 additional quotes from different vendors are required. If no additional quotes are required, process your request with Purchasing. Send the 3 quotes and tabulation sheet to the purchasing office for processing.*

QUOTE #1

Vendor Name:	Contact Person:	Quote for Items:	Shipping Cost:	Total Quote:
Vendor ID# (TX):	Phone Number:			
	Fax Number:			
	Email:			

QUOTE #2

Vendor Name:	Contact Person:	Quote for Items:	Shipping Cost:	Total Quote:
Vendor ID# (TX):	Phone Number:			
	Fax Number:			
	Email:			

QUOTE #3

Vendor Name:	Contact Person:	Quote for Items:	Shipping Cost:	Total Quote:
Vendor ID# (TX):	Phone Number:			
	Fax Number:			
	Email:			

****If recommended vendor is other than lowest price, provide a narrative justifying the purchase.**

*****Circle awarded vendor**

Campus/Department Signature for Quote Verification

Date

*All office supplies are purchased from Approved office supply vendors.
*All technology requests need to go through Technology for approved quotes.