

**EDINBURG CONSOLIDATED INDEPENDENT SCHOOL DISTRICT
 QUOTE FORM
 COMPLETE THIS FORM AND FAX TO PURCHASING DEPT: 383-7687**

DATE: _____

REQ NO.

DEPARTMENT/CAMPUS: _____

| | | | VENDOR NAME: | | | | | |
|--------------------|-----|---|--------------|-------|--------------|-------|--------------|-------|
| ITEM # | QTY | DETAILED DESCRIPTION example - color, size, etc. | QUOTED PRICE | TOTAL | QUOTED PRICE | TOTAL | QUOTED PRICE | TOTAL |
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| GRAND TOTAL | | | | | | | | |

If not using lowest vendor, please explain why: