

Quotation Record Form

Name: _____

Date: _____

School/Department: _____

Description of item(s) or service(s):

Vendor 1: _____

Price: _____ Quote Dated: _____

Quote Method: ☐ Website/Catalogue Listing ☐ Phone/Verbal ☐ Written Proposal

Vendor Type: ☐ Preferred Source ☐ State/SUNY Contract ☐ MWBE/SDVOB ☐ Open Market

Written Quote Received: Yes ☐ No ☐ Document Attached: Yes ☐ No ☐

Vendor Contact: Name: _____

Email: _____ Phone #: _____

Comments: _____

Vendor 2: _____

Price: _____ Quote Dated: _____

Quote Method: ☐ Website/Catalogue Listing ☐ Phone/Verbal ☐ Written Proposal

Vendor Type: ☐ Preferred Source ☐ State/SUNY Contract ☐ MWBE/SDVOB ☐ Open Market

Written Quote Received: Yes ☐ No ☐ Document Attached: Yes ☐ No ☐

Vendor Contact: Name: _____

Email: _____ Phone #: _____

Comments: _____

Vendor 3: _____

Price: _____ Quote Dated: _____

Quote Method: ☐ Website/Catalogue Listing ☐ Phone/Verbal ☐ Written Proposal

Vendor Type: ☐ Preferred Source ☐ State/SUNY Contract ☐ MWBE/SDVOB ☐ Open Market

Written Quote Received: Yes ☐ No ☐ Document Attached: Yes ☐ No ☐

Vendor Contact: Name: _____

Email: _____ Phone #: _____

Comments: _____