



The School District of Springfield R-12

Verbal/Written Quote Summary Sheet

(Minimum 3 quotes required for items/services costing at least \$1,000 but less than \$25,000)
Use this form to summarize quotes received and to recommend a vendor for award.

Name: _____ Dept/School: _____ Phone: _____

Requisition Number: _____ Signature of Person Obtaining Quotes: _____

Item/Service Requested: _____

Note: If you are unable to obtain 3 quotes, contact the Purchasing Department at (417) 523-0073 or 36223.

Indicate whether the quotes are written or verbal: _____ Written _____ Verbal (If written, please attach quotes to this form.)

	Date	Vendor Name	Contact Person	Phone Number	Total \$ Amount Quoted
1					
2					
3					

Recommended Vendor: _____

If you are recommending other than low quote, you are required to provide written justification as to why the low quote was not selected:

Purchasing Acknowledgement: _____ Date: _____

For quotes less than \$10,000, please retain this form and written quotes. The Purchasing Department will conduct random audits to insure Board Policies are being followed. For quotes over \$10,000, this form and supporting paperwork will need to be sent to Purchasing for review prior to a purchase order being issued.