Note: (1) Control Agent initial here: if low bid is acceptable. (2) Attach memo stating why low bid is not acceptable (3) Return your recommendation to Purchasing

Purchasing Agent: Nursing Depart.		Box No.:	Phone Number:
Bid Number: 09-10-28	Advertising Date: April 29, 2010	Opening Date: May 11, 2010	Time: 2:00 p.m.
Description: Catalog Price Discount			Results Sent:
Purchasing Agent:		Witness:	

			Conney Safety		School Health		Bio Company		Coast Marketing	
Item	Description	Qty	Unit Price	Total	Unit Price	Total	Unit Price	Total	Unit Price	Total
1	Price Catalog Discount	1	30.00%	0.30	12.00%	0.12	5.00%	0.05	25.00%	0.25
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
TOTAL PRICE										
TERMS										
DELIVERY										
FOB										
IN-STATE PREFERENCE NUMBER										

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Bid Number: 09-10-28	Advertising Date: April 29, 2010	Opening Date: May 11, 2010	Time: 2:00 p.m.
Description: Catalog Price Discount			Results Sent:
Purchasing Agent:		Witness:	

			MacGill		High Smith		Smile Makers		Kaplan Early	
Item	Description	Qty	Unit Price	Total	Unit Price	Total	Unit Price	Total	Unit Price	Total
1	Price Catalog Discount	1	5.00%	0.05	15.00%	0.15	10.00%	0.10	15.00%	0.15
				0.00		0.00		0.00		0.00
				0.00		0.00	non- medical	#VALUE!	non-medical	#VALUE!
				0.00		0.00	supplies	#VALUE!	supplies	#VALUE!
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
TOTAL PRICE										
TERMS										
DELIVERY										
FOB										
IN-STATE PREFERENCE NUMBER										

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Purchasing Agent: Nursing Depart.		Box No.:	Phone Number:
Bid Number: 09-10-28	Advertising Date: April 29, 2010	Opening Date: May 11, 2010	Time: 2:00 p.m.
Description: Catalog Price Discount			Results Sent:
Purchasing Agent:		Witness:	

			Mackin Ed. Resource							
Item	Description	Qty	Unit Price	Total	Unit Price	Total	Unit Price	Total	Unit Price	Total
1	Price Catalog Discount	1	N/B	#VALUE!						
				0.00						
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
				0.00		0.00		0.00		0.00
TOTAL PRICE										
TERMS										
DELIVERY										
FOB										
IN-STATE PREFERENCE NUMBER										