\* \* INVITATION TO BID \* \*

Nutrition Services Fremont RE-1 Invitation #

1030 S 4th Street Bid Closing 5/19/17

Cañon City, CO 81212

Sealed Bids, subject to the conditions herein stipulated and in accordance with specifications set forth and/or attached hereto, will be accepted in the office of the Manager of Nutritional Services, for school district Fremont RE-1, Cañon City, Colorado, prior to 9:00 a.m., May 19, 2017 in sealed envelopes with the name and address of the bidder, date and hour of opening, and invitation number on the face of the envelope. Please direct inquiries concerning this bid to Heather Williams, (719) 276-5813, Fax No. (719) 276-5825.

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| **ITEM****NO.** | **COMPLETE DESCRIPTION OF****ITEMS OR SERVICES** | **QUANTITY** | **UNIT** | **UNIT****PRICE** | **AMOUNT** |
|  |  |  |  |  |  |
|  | Medium Fork Plastic |  | 1000/cs |  |  |
|  | Medium Knife PlasticMedium Spoon PlasticMedium Sporks Plastic9” Round Foam PlateFilm Wrap 18x2000Foil Wrap Heavy Weight 18X10004 oz Plastic Souffle Cup2 oz Plastic Souffle CupCafé Cups 12 ozClear Cups 12 ozCafe lids 12 oz 5 compartment plateSandwich bagsTall dispenser napkins Heavy Forks PlasticHeavy Spoons PlasticHeavy Knives Plastic8 oz Styro CupsPan LinersBun Pan Bags 21x6x35 Gallon Storage Bags8 oz styro squat bowls12 oz styro bowlsDinner Napkins(Heavy)Prices F.O.B. Canon City, Colorado |  | 1000/cs1000/cs1000/cs500/csrollrollcasecasecasecasecasecaseboxcase1000/cs1000/cs1000/cs 500/cs1000 ct 200 ctBoxCaseCaseCase |  |  |
| NOTE: Terms considered as part of bid Net 30 days (Minimum 30 day required).NOTE: Particular attention is invited to paragraphs 15 (Late Bids) & 16 (Active Bidders List).Bids may be awarded either by item or by lot, whichever is tote advantage of School District Fremont RE-1.This quotation is submitted by: Name of Vendor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print Name/Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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