\* \* INVITATION AND 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 by May 19, 2017.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **ITEM**  **NO.** | **COMPLETE DESCRIPTION OF**  **ITEMS OR SERVICES** | **QUANTITY** | **UNIT** | **UNIT**  **PRICE** | **AMOUNT** |
|  |  |  |  |  |  |
|  | Products noted on the attached product list, as per the following specifications.  Your company is invited to bid on food items for the school year 2017/2018. Conditions of the contract will include the following requirements.  Delivery to the individual school sites listed on the attached sheet.  Provide service to the existing dispensing systems in a timely manner. |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  | Prices F.O.B. Cañon City, Colorado |  |  |  |  |

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 to the 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.: |  |

Form #B-021

8/91