



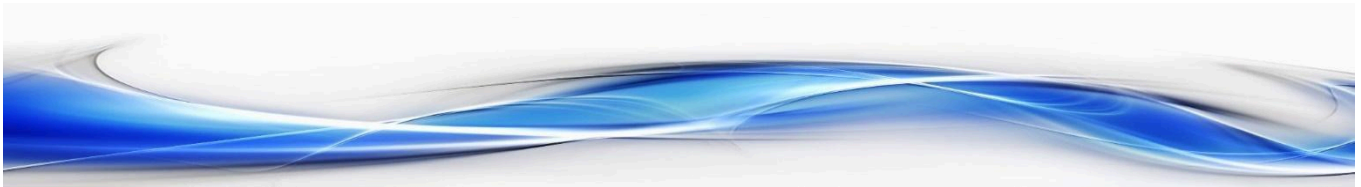
*Business office*

*1 University Place, 4<sup>th</sup> Floor*

*Irvington, New Jersey*

**APPENDIX- G**

# **QUOTATION REQUEST FOR SERVICES**



**Title of Quotation:**



**Quotation Due Date:**



Weekday, Month, Year

**Reggie Lamptey, CPA**  
**Assistant Superintendent for Business/Board Secretary**

**Business Office**  
1 University Place, 4<sup>th</sup> Floor  
Irvington, NJ 07111

Quotation Form – Services



# IRVINGTON BOARD OF EDUCATION

Quotation Due Date \_\_\_\_\_  
Weekday, Month, Day, Year

**Purpose of Quote**

*The Irvington Board of Education is soliciting quotes for the following service(s):*

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**Vendor Proposal/Quote**

I/We hereby submit the following quotation(s) as per the above specifications.

Name of company \_\_\_\_\_

*Please provide a clear and detailed statement of the work to be provided and a breakdown of the cost. (Attach additional sheets if necessary)*

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# IRVINGTON BOARD OF EDUCATION

## Quotation Form – Services (Continued)

I/We hereby submit the following quotations as per the attached specifications.

Name of company \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone No. \_\_\_\_\_ Extension \_\_\_\_\_

Fax No. ( ) \_\_\_\_\_ E-Mail \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Authorized Agent \_\_\_\_\_ Date \_\_\_\_\_

**Agent's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

### Optional

Please put our company's Quote Number \_\_\_\_\_ on all purchase orders to ensure correct pricing.

All quotations must be received no later than \_\_\_\_\_.  
Weekday, Month, Day, Year

This quotation is to be sent to:

Name & Title \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

Fax: \_\_\_\_\_

