

BID SOLICITATION

Printed: 01/25/2021



Cedar Rapids Community School District
 Purchasing Department
 2500 Edgewood Rd NW
 Cedar Rapids, IA 52405

BID OPENING DATE AND TIME:
 2/23/2021 10:00:00 AM

BID NUMBER:
 00001451

BUYER: Kathy Kinley
 PHONE NUMBER: (319) 558-2321
 DELIVERY REQUIRED:

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Cedar Rapids Community School District
 Central Receiving
 2500 Edgewood Rd NW
 Cedar Rapids, IA 52405

Item	Class-Item	Quantity	UOM	Unit Price	Total
2	Bids are due on Wednesday, February 10, 2021 at 10:00am CST. * ALL RESPONSES MUST BE ON THIS FORM. * Please FAX your response on this form to (319) 558-2327 or email to bids@crschools.us. Please be sure to completely fill out this form. * All PRICING SHOULD INCLUDE ANY DELIVERY CHARGES, SHIPPING AND HANDLING, AND WILL BE FOB DESTINATION. 2500 Edgewood Rd NW, Cedar Rapids, IA 52405 . * **VENDOR MUST BE ACTIVE VENDOR IN GOOD STANDING WITH ERATE. ERATE SPIN NUMBER REQUIRED WITH BID RESPONSE. * **ORDER WILL BE PLACED AFTER ERATE APPROVAL OF FUNDING. *				
3	Bids are due on Tuesday, February 23, 2021 at 10:00am CST. * ALL RESPONSES MUST BE ON THIS FORM. * Please FAX your response on this form to (319) 558-2327 or email to bids@crschools.us. Please be sure to completely fill out this form. * All PRICING SHOULD INCLUDE ANY DELIVERY CHARGES, SHIPPING AND HANDLING, AND WILL BE FOB DESTINATION. 2500 Edgewood Rd NW, Cedar Rapids, IA 52405 . * * * VENDOR MUST BE ACTIVE VENDOR IN GOOD STANDING WITH ERATE. ERATE SPIN NUMBER REQUIRED WITH BID RESPONSE. * * * ORDER WILL BE PLACED AFTER ERATE APPROVAL OF FUNDING. *				
1	FortiAnalyzer 1000F with 36 month Enterprise Protection SKU: FAZ-1000F-BDL-432-36 * Minimum quantity will be 1. * Functional Equivalent or Better Device May Be Proposed. * Functional Equivalent: _____	1	EA	_____	_____

				TOTAL:	_____
NOTE: ALL BIDS RECEIVED ARE SUBJECT TO THE TERMS AND CONDITIONS ON REVERSE SIDE OF THIS FORM.					

WE AGREE TO FURNISH ANY OR ALL OF THE ITEMS QUOTED AT THE PRICES SHOWN.
 QUOTE MUST BE HELD FIRM FOR PERIOD OF 60 DAYS.

TERM OF PAYMENT: Net 30
 DELIVERY: F
 TELEPHONE NUMBER: _____
 FAX NUMBER: _____

COMPANY: _____
 SIGNATURE: _____
 NAME AND TITLE: _____