Instructions – Enter department or college name and address in top right corner to personalize the form. Enter date and vendor information in left address block (make a separate form for each vendor). Quote deadline and reply information in right block. Quantity, unit of measure and description of items for quoting in body of form. (Instructions will not print on form)

QUOTE REQUEST

Request Date:

The University of Texas at Austin
Department/College Name
Enter Address
Austin, TX 78712

VENDOR NAME:
ADDRESS:
CITY, ST, ZIP:
CONTACT NAME:
PHONE:
EMAIL:

QUOTE DUE DATE:
QUOTE DUE TIME:
ATTN:
EMAIL:
PHONE:
FAX:
ALT CONTACT:

PAYMENT TERMS	SALES TAX	FOB	FREIGHT CHARGES
Net 30	Exempt	Destination (Preferred)	None - unless noted below

QTY	U/M	DESCRIPTION	LEAD TIME	UNIT PRICE	LINE TOTAL
STATE/COOP CONTRACT NO.		QUOTE EXPIRES:_____ DAYS			
				SUBTOTAL	
				FREIGHT	
				TOTAL	