

## OREGON STATE UNIVERSITY REQUEST FOR QUOTE (RFQ)

					ISS	SUE DATE:		06/08	8/16			
RFQ#		MA182672Q				RFQ DUE DATE:			06/14/16 @ 3:00 PM			
		DELIVER TO:				REQUESTED BY / RETURN QUOTE TO:						
DEPARTMENT: Marketplace			ace West	NAME:				Michele Andersen				
ADDRESS:		351 SW 30th St			E-N	-MAIL: michele.andersen@oregonstate.edu						
CITY, STATE ZIP:		Corvallis, OR 97331			TE	<b>TELEPHONE</b> : 541-737				3667		
	IRED DELIVE				FA	X:	į	541-737-2170				
ITEM	DESCRIPTION					Q <sup>-</sup>			UNIT	UNIT PRICE	TOTAL PRICE	
1	Compactor							E	EA			
	5. <u>Wa</u>	and on-site ns must be es of instal Shipping,	inimize  In case it  In case it  In he hyd.  Ith cart  I			ng	TOTAL					
DELIVERY TIME AFTER RECEIPT OF ORDER:							PRICES VALID THROUGH:					
SPECI	AL INSTRUC	TIONS:		VENDOR INFORMATION:								



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COMPANY.										
COMPANT:										
ADDRESS:										
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t CONTACT NAME:										
y   = MAII -										
TELEBUONE.										
EAY.										
VENDOR SIGNATURE:  By signature below the undersigned certifies that they are authorized to act on behalf of the										
SIGNATURE:										
NAME/TITLE:										
This procurement is subject to the indicated Oregon State University Standard Terms and Conditions for: 🖂 Goods										
Services Purchase Order Construction Software. The indicated terms and conditions may be viewed at										
attp://pacs.oregonstate.edu/terms-and-conditions										
	COMPANY:  ADDRESS:  CITY, STATE, ZIP:  CONTACT NAME:  E-MAIL:  TELEPHONE:  FAX:  By signature below the quote  SIGNATURE:  ed  NAME/TITLE:  ed Oregon State Universeruction Software.									