OREGON STATE UNIVERSITY
REQUEST FOR QUOTE (RFQ)

		ISSUE DATE:	8/19/16
RFQ #	**MA184063Q**	**RFQ DUE DATE:**	**8/25/16 @ 1:30 PM**
DELIVER TO:		**REQUESTED BY / RETURN QUOTE TO:**	
DEPARTMENT:	Oregon State University	**NAME:**	Michele Andersen
ADDRESS:	105 Gill Coliseum	**E-MAIL:**	michele.andersen@oregonstate.edu
CITY, STATE ZIP:	Corvallis Oregon, 97331-8547	**TELEPHONE:**	541-737-3667
REQUIRED DELIVERY DATE:	ASAP	**FAX:**	541-737-2170

ITEM	DESCRIPTION	QTY	UNIT	UNIT PRICE	TOTAL PRICE
1	Chattanooga 3319102: I-Skin Adapta Table Color-Midnight	2	EA		
2	Dynatronic Corp x5Plus	1	EA		
3	Chattanooga 2402: Heating Unit Hydrolic W/12	2	EA		
4	Life Fitness OSR-0000: Recumbent Lifecycle Activity Series	1	EA		
5	Chattanooga 2789: Vectra Genisys 4 Channel	4	EA		
6	DJO Inc. 27333: Applicator Vectra Genisys	1	EA		
7	Chattanooga 27812: Applicator Lsr f/VectraGe Reusable	1	EA		
8	Synnex Corp. 2518873: Sit Stand Work Station	1	EA		
	Brand Specific Required				
Delivery is f.o.b. destination, prepaid and allowed. Shipping, freight and handling must be included in quoted prices. Additional costs for such are disallowed.				**TOTAL**	
DELIVERY TIME AFTER RECEIPT OF ORDER:		**PRICES VALID THROUGH:**			

SPECIAL INSTRUCTIONS:

1. Unless otherwise specified, all items quoted are to be new, unused and not remanufactured in any way.
2. Brand names are for the purpose of describing and establishing the characteristics desired and are not intended to limit or restrict competition. Quoters may submit quotes for substantially equivalent products unless the RFQ provides that a specific brand is necessary because of compatibility requirements, etc. All such brand substitutions shall be subject to approval by OSU.
3. Quoters must clearly identify all products quoted. Brand name and model or number must be shown.
4. Only documents issued as addenda by OSU serve to change the RFQ in any way.
5. OSU reserves the right to make the award by item, partial or whole lots, groups of items or entire quote, whichever is in the best interest of OSU.
6. OSU may reject any Quote not in compliance with the RFQ, attachments, and addenda, or if it is in the best interest of OSU.
7. This RFQ form must be completed, signed and returned with all required documents.

VENDOR INFORMATION:	
COMPANY:	
ADDRESS:	
CITY, STATE, ZIP:	
CONTACT NAME:	
E-MAIL:	
TELEPHONE:	
FAX:	
VENDOR SIGNATURE: *By signature below the undersigned certifies that they are authorized to act on behalf of the quoter and will comply with all aspects of the quote herein.*	
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 http://pacs.oregonstate.edu/terms-and-conditions