

OREGON STATE UNIVERSITY REQUEST FOR QUOTE (RFQ)

						ISSUE DATE:			9-13-2018				
RFQ# #RFQ93725454						RF	Q DUE DAT	E:	9-14-2018, 4:00pm pt				
		0:					REQUESTED BY / RETURN QUOTE TO:						
DEPAI	RTMENT:			NAME:			Donna Cain						
ADDRESS: 114 Plageman Hall,			Oregon State			E-MAIL:			donna.cain2@oregonstate.edu				
CITY, STATE ZIP: Corvallis, OR, 9733			1 TELEPHONE			LEPHONE:		541-737-3423					
REQUIRED DELIVERY DATE:				FAX:				541-737-2170					
ITEM	ITEM DESCRIPTION								ГΥ	UNIT	UNIT PRICE	TOTAL PRICE	
1	NEXPLANON 68MG IMPLANT (IMPLANON, NEXPLANON					N)) 175 EA			EA			
Delivery is f.o.b. destination, prepaid and allowed. Shipp							froight an	d h	andl	ina			
must be included in quoted prices. Additional costs for													
DELIVERY TIME AFTER RECEIPT OF ORDE				R:				PF	PRICES VALID THROUGH:				
SPECIAL INSTRUCTIONS:				VENDOR INFORMATION:									
	ss otherwise speew, unused and	COMPANY:											
way.	nd names are fo	ADDRESS:											
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				CITY, S	TATE, ZIP:								
be subj	ect to approval b												
Brand r	name and model												
serve to	change the RF	VENDOR SIGNATURE:											
item, pa	artial or whole lot	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:											
the RFC	Q, attachments, a												
7. This	RFQ form must	NAME/T	TTLE:										
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													
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.			SIGNATURE: NAME/TITLE: Oregon State Unive			undersigned c and will comp	ertifi ly wit	ies tha th all a	at they are aspects of and Cor	authorized to act the quote herein.	Goods		

http://pacs.oregonstate.edu/terms-and-conditions