

GISD PURCHASING OFFICE BID TABULATION SHEET

bidtabsh

NOTE: (1) Control Agent initial here _____ if low bid is acceptable. (2) Attach memo stating why low bid is not acceptable. (3) RETURN ALL BIDS TO PURCHASING

DEPARTMENT/SCHOOL: Nursing and Health Services BOX NO: USER/PHONE NO:

BID NUMBER: 05-06-27 ADVERTISING DATE: February 16, 2006 OPENING DATE: February 28, 2006 TIME: 2:00

DESCRIPTION: Catalog Price Discounts Medical Supplies RESULTS SENT TO DEPT:

PURCHASING AGENT: Mikhael M. Abant WITNESS: Rama S. Wright

| Item | DESCRIPTION | Q/ Un | <u>School Health</u> | | <u>School Nurse supply</u> | | <u>Armstrongs Medical</u> | | <u>Medco</u> | | Un \$ | Total | Un \$ | Tot |
|------|-------------------------------------|-------|----------------------|-------------|----------------------------|------------|---------------------------|------------|--------------|-------------|-------|-------|-------|-----|
| | | | Un \$ | Total | Un \$ | Total | Un \$ | Total | Un \$ | Total | | | | |
| | <u>Discount on Medical Supplies</u> | | | <u>1170</u> | | <u>690</u> | | <u>590</u> | | <u>1170</u> | | | | |
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| TOTAL PRICE | |
| TERMS | |
| DELIVERY | |
| FOB | |
| IN-STATE PREFERENCE NUMBER | |