

REQUEST FOR RESPONSE

BOARD OF SUPERVISORS OF

RESPONSE DUE DATE AND TIME

LSU

VENDOR #

VENDOR NAME AND ADDRESS

FAX 225-578-

Louisiana State University
Baton Rouge, LA 70803

BUYER
BUYER PHONE

ISSUE DATE

TITLE:

REQUEST FOR RESPONSES

In accordance with State of Louisiana Purchasing Rules and Regulations (LAC 341:1709: Use of Brand Name; LAMAS, and Multi-State Contracts), the University is requesting price responses for furnishing state contract items and/or services functionally equivalent to those specified herein and that will meet the University's needs. **Prices shall be firm and fixed, and shall not exceed the vendor's current state contract prices. All terms, conditions, and specifications of the state contract shall apply to your response and to any subsequent order.**

Price, along with other factors, will be used by the University to make a best value determination. Other evaluation and selection factors may include, but are not limited to, probable equipment life, environmental and energy efficiency considerations; technical qualifications; delivery terms; warranty; maintenance availability; administrative costs; compatibility with the user's environment; and user's familiarity with the item or service.

General Instructions to Vendors

1. Responses will be received by the issuing LSU Campus/Department at the "Return Response To" fax number and/or address stated above, until the specified due date and time.
 2. Responses must be signed by a person authorized to bind the state contract holder.
- alteration to unit prices are to be initialed by the vendor.

invoiced delivery charges not quoted and itemized on the LSU purchase order are subject to rejection & nonpayment.

5. By signing this Request for Response, the vendor certifies that this response is made without collusion or fraud.

TO BE Completed by vendor

Specify your internal reference number to appear on any recurring order.

E-MAIL

FEDERAL TAX ID #

SOLICITATION

DUE DATE

DUE TIME

ITEM No.	ITEM DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	EXTENDED AMOUNT
	UNLESS SPECIFIED ELSEWHERE, SHIP ALL ITEMS TO:				

SOLICITATION

DUE DATE

DUE TIME

ITEM No.	ITEM DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	EXTENDED AMOUNT

SOLICITATION

DUE DATE

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