

1400 Washington Ave  
UAB 226  
Albany, NY 12222



Phone: (518)437-5090  
Fax: (518)437-5089

## THE UNIVERSITY AT ALBANY FOUNDATION

### Vendor Quote Form

This form must be attached to your request for disbursement form for commodities \$2,500 to \$9,999 and Services \$5,000 to \$9,999. For amounts \$10,000 and above please submit form prior to purchase.

#### **FIRST QUOTE:**

**Vendor Name:**

**Vendor Phone Number:**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Area Code Phone Number

**Verbal Quote Received:**

**Vendor Contact:**

\$ \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
Name

#### **SECOND QUOTE:**

**Vendor Name:**

**Vendor Phone Number:**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Area Code Phone Number

**Verbal Quote Received:**

**Vendor Contact:**

\$ \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
Name

#### **THIRD QUOTE:**

**Vendor Name:**

**Vendor Phone Number:**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Area Code Phone Number

**Verbal Quote Received:**

**Vendor Contact:**

\$ \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
Name

#### **VENDOR SELECTED:**

\_\_\_\_\_  
Name

Approved: \_\_\_\_\_

Date: \_\_\_\_\_

**Justification as to the reasonableness of vendor selected:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_