

BID REQUEST

BID NO: 01- JPP MAILING DATE: February 26, 2001
COMMODITY: Janitorial Paper Products BUYER NAME: Jim Bembenek
Purchasing Manager
AGENCY: City of Wauwatosa PHONE NO: (414) 479-8958
7725 West North Avenue
Wauwatosa, WI 53213

TIME AND PLACE: Sealed bids for furnishing the above commodity will be received until 2:01 P.M. on March 13, 2001 at the office of the City of Wauwatosa Purchasing Department.

Bids will be opened and read by the Purchasing Manager at _____ same as above _____.

Bids must be returned in a sealed envelope identified with the bid number and opening date in the lower left-hand corner. V.A.L.U.E. reserves the right to reject bids that are not properly identified **or are received late**.

Please submit 2 copies of your bid response.

******NON-COLLUSION STATEMENT******

By signing below, bidder hereby certifies that bid has been made without any connection with any other bidder and is in all respects fair and without collusion or fraud, and it is made with the understanding that no elected officer or any employee of any municipality has any interest, directly or indirectly unless otherwise stated.

******WISCONSIN'S RIGHT TO KNOW LAW******

It is a direct condition of the terms of this bid that if there is any toxic substances, materials or infectious agents, the bidder shall supply one copy of material safety data sheets and product labeling information with your bid response. V.A.L.U.E. reserves the right to reject any bid not in compliance.

We agree to furnish the above according to your specifications, at prices and conditions specified herein.

ONLY CASH DISCOUNTS OF 30 DAYS OR MORE SHALL BE DEDUCTED IN DETERMINING THE LOW BIDDER.

Cash discount for payment following acceptance of goods and receipt of invoice _____ % _____ days.

Delivery shall be no later than _____ workdays after receipt of order. (FOB Destination)

BIDS NOT MANUALLY SIGNED SHALL NOT BE ACCEPTED. Please print the following:

Firm Name _____

Address: _____

City, State, Zip _____

Phone No. _____ Fax No. _____

Date _____

Printed Name/Title _____

Authorized Signature _____