# REQUEST FOR QUOTES



**Name of Meeting**

**The Mississippi Department of Education**

**OFFICE**

**Central High School Building**

**359 North West Street Suite #**

**Jackson, MS 39205**

**Contact: NAME**

**Date of Release: DATE**



# Please note that words in red need to be replaced with black text or deleted.

(Please contact the Procurement Office for questions)

**SAMPLE QUOTE**

The Mississippi Department of Education is soliciting quotes for a meeting as identified below. The offeror providing the lowest quote will be awarded. The terms of the award will be payable upon completion of the meeting and submission of an invoice. **If you are interested in submitting a quote, please review the following information and attach an agreement and/or Banquet Order (BO) for review.**

Awarding Office Name: Requesting office

Awarding Office Contact Name: Name

Terms of Agreement: Date(s) of meeting

Expected Attendance: Number

***Venue Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Vendor Authorized Signature* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |
| --- | --- | --- |
| **Specifications** | **Description** | **Cost** |
| Workshops  | 10 workshops with presenters required in 10 rooms with panel tables for 12 people.  |  |
| Lunch | Panel tables needed for 15 people to conduct award ceremony |  |
| Dance Hall with Strobe lighting  | Evening dancing and mingling for 200 registered people |  |

 **Total cost for services $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please submit quotes by 5:00 p.m. **day, month day, year** and email to **email@mdek12.org****.**