



City of Brockton, Massachusetts

Chapter 30B Quote Form

(\$10,000 to \$50,000 for Goods & Services)

**written contract required for all procurements over \$10,000*

Date: _____

Department: _____ Contact Name: _____

1) Type Supply Service or Supply & Service: _____
Purpose of Use: _____

2) Kind of Procurement Emergency Procurement Sole Source Grant Agreement 30B Exempt
If so, why? _____

3) Quotes Solicited From:

A. Company Name: _____ Quote: \$ _____
Address: _____ Date: _____
City/State/Zip Code: _____ Title: _____
Contact Person: _____ Phone: (____) _____
E-mail: _____

B. Company Name: _____ Quote: \$ _____
Address: _____ Date: _____
City/State/Zip Code: _____ Title: _____
Contact Person: _____ Phone: (____) _____
E-mail: _____

C. Company Name: _____ Quote: \$ _____
Address: _____ Date: _____
City/State/Zip Code: _____ Title: _____
Contact Person: _____ Phone: (____) _____
E-mail: _____

Please send correspondence & any supporting information to: Procurement@cobma.us

Authorized by:

Department Head's Signature

Date

Approved by:

Michael C. Morris
Chief Procurement Officer

Date

For Procurement use only:
Contract/Project #: _____