



City of Brockton, Massachusetts

Procurement Quote Form

Chapter 30B (\$10,000 to \$50,000 for Goods & Services)

Statewide Contracts (\$10,000 or Greater)

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

Date: _____

Department: _____ Contact Name: _____

1) Type of contract: Supply Service Supply & Service _____

Purpose of Use: _____

2) Special Procurements: Emergency Procurement Sole Source Grant Agreement Exempt

If 30B is Exempt, why? _____

3) Statewide Contract #: _____ 4) Contract End Date: _____

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 #: _____