



The University of Vermont

Req ID# \_\_\_\_\_

## University of Vermont Purchasing Services Quotation Evaluation Form

This form must be completed for all purchases greater than \$25,000, but less than \$50,000. A minimum of three quotes should be obtained and attached to this form. If this purchase is determined by your department to be a Sole or Single Source, please complete a [Single/Sole Source Justification Form](#) instead.

Prepared by: \_\_\_\_\_ Department: \_\_\_\_\_ Phone: \_\_\_\_\_

Purchase Description: \_\_\_\_\_  
\_\_\_\_\_

Required Delivery Date: \_\_\_\_\_

Company 1.) \_\_\_\_\_ 2.) \_\_\_\_\_ 3.) \_\_\_\_\_

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

**Total Price** \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

After evaluating all of the above, please make your supplier recommendation below. If the decision is based on anything other than price, please describe the reasoning and value for the selection.

Recommended Supplier: \_\_\_\_\_

Basis for Recommendation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The information provided above is accurate and represents a fair and impartial evaluation of quotations received.

Name/Title: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Phone: \_\_\_\_\_

Please scan and attach to your requisition in PeopleSoft referencing your requisition ID#.