

DePauw University Business Services 300 W. Hill Street Greencastle, IN 46135

Vendor Selection Form

This form documents the purchase of goods and/or services greater than \$5,000. Submit this form, along with

original quotes, with the Purchase Order to Business Services, 300 W. Hill Street, Greencastle, IN 46135. For more information, please see the University Purchasing Policy. Date: ______ Requisitioner: _____ Department: _____ Quotes Obtained By: ☐ Business Services ☐ Department ☐ Other (explain) Competitive Quote Information (List three most competitive quotes received): Quote Item or **Supplier Name** Date Model# Price Comments Supplier/Consultant Selected Supplier Name: _____ Contact Name: _____ Contact E-Mail Address: City: _____ State: ____ Zip: ____ Country: Phone: _____ Reason for Selection (add explanation below) ☐ Supplier provided the best overall offer ☐ Emergency/Urgency ☐ Contract with vendor for goods or services ☐ Compatibility with existing equipment ☐ Supplier is sole manufacturer/provider ☐ University sponsored consortia ☐ Supplier is sole acceptable manufacturer/provider ☐ Other (explain below) **Explanation (attach additional information below)** To Be Completed by Business Services ☐ Yes ☐No The vendor quotes/explanation have been reviewed and appear reasonable for the proposed specifications. Signature: