

BEST VALUE DETERMINATION WORKSHEET

Offers Obtained By: _____

Date: _____

Signature:.....

	Offer #1	Offer #2	Offer #3
LPA Contract Number:			
LPA Supplier Name			
LPA Supplier Address, City, State, Zip			
Person Contacted			
Phone Number			
Fax Number			
Certified Small Business	Yes # _____ No _____	Yes # _____ No _____	Yes # _____ No _____
Disabled Veteran	Yes # _____ No _____	Yes # _____ No _____	Yes # _____ No _____

Date Offer Received			
Date Offer Expires			
Discount Offered			
Warranty Period			
Delivery Date			

Line #	Description	Qty	Unit \$	Extension	Unit \$	Extension	Unit \$	Extension
1.								
2.								
3.								
4.								
5.								
6.								
Unless otherwise stated in the LPA Contract, shipping is FOB Destination, Freight Prepaid								

"Best Value" determination can be based upon costs alone or other factors that are critical to a department's project or effort. LPA Supplier selection was determined based upon the following best value criteria:

Total RFO Cost (Tax is not an evaluation item, add tax to the Purchase Order)							
---	--	--	--	--	--	--	--