

**DISTRICT BOARD OF TRUSTEES  
PENSACOLA STATE COLLEGE  
1000 COLLEGE BOULEVARD  
PENSACOLA, FL 32504-8998**

July 30, 2013

QUOTATION NO. 3-2013/2014  
REQUEST FOR QUOTATIONS  
CORSAIR NEWSPAPER

All terms and conditions, included hereafter, are part of this quotation request. Any quotation failing to comply with all of these terms and conditions may not be accepted. Rights are reserved to reject any and all quotations and to waive any and all technicalities.

Directions for submitting quotations include the following:

1. All quotations must be mailed, faxed, or delivered to the attention of the Director of Purchasing and Auxiliary Services, and be received in the Purchasing and Auxiliary Services Office, Pensacola State College, Building 7, Room 737, 1000 College Boulevard, Pensacola, Florida 32504-8998 (Fax No. 850-484-1839), or emailed to [cboatwright@pensacolastate.edu](mailto:cboatwright@pensacolastate.edu) no later than 2:00 P.M., local time, August 5<sup>th</sup>, 2013 and shall be clearly marked REQUEST FOR QUOTATION NO. 3, 2013/2014 – CORSAIR NEWSPAPER.
2. Price, quality, specifications and time of guaranteed delivery will be determining factors in the awarding of this quotation.
3. All quotation prices shall be F.O.B. Pensacola State College.
4. All quotation prices will be considered firm until orders are placed.
5. Quotations may be awarded or rejected at the discretion of Pensacola State College.
6. If equivalent products are offered, the manufacturer's name and model number shall be clearly indicated on the quotation form. Any item(s) offered as equivalent to that which is specified must be equivalent in quality of materials, workmanship, and effect and shall be corresponding in function and performance. Descriptive literature and/or complete specifications shall be included for any item(s) as approved equivalent(s). Quotations lacking any written indication of intent to quote an alternate product or brand will be considered to be in complete compliance with the specifications of the quotation form. Pensacola State College shall retain the right to determine the acceptability of any item(s) offered as equivalent to any item(s) specified.
7. All quotations shall be submitted on the quotation form, herein included, and shall be properly signed by an authorized representative of the firm or entity submitting the quotation, with delivery or completion date clearly indicated, in order to be considered. Attach all amplifying instructions and documents to this quotation form.
8. In the event of an error in extending the total cost of any item, the unit price submitted will prevail.

9. In the event that you are unable to submit a quotation, written notification should be submitted to the Purchasing and Auxiliary Services Office, in order for your firm's name to remain on the mailing list.
10. Prices shall remain firm through college catalog project.

#### GENERAL SPECIFICATIONS

Pensacola State College reserves the rights to award item-by-item, in subgroups(s), or in whole, at the discretion of the College.

The quotes provided shall be inclusive of all charges associated with the printing and delivery of items to Pensacola State College.

A proof will be required for each typesetting for approval, prior to printing.

**ANTI-DISCRIMINATION CLAUSE:** Pensacola State College is committed to an environment that embraces diversity, respects the rights of all individuals, is open and accessible, and is free of harassment and discrimination based on, but not limited to, ethnicity, race, creed, color, religion, age, disability, sex, marital status, national origin, genetic information, political opinions or affiliations, and veteran status. To the extent applicable, the nondiscrimination clause contained in Section 202, Executive Order 11246, as amended by Executive Order 11375, relative to Equal Employment Opportunity for all persons without regard to race, color, religion, sex, or national origin, and the implementing rules and regulations prescribed by the Secretary of Labor, are incorporated herein.

**AMERICANS WITH DISABILITIES ACT:** The successful bidder/proposer shall comply with the Americans with Disabilities Act. In the event of the Contractor's noncompliance with the nondiscrimination clauses, the Americans with Disabilities Act, or with any other such rules, regulations, or orders, any agreement resulting from this solicitation may be canceled, terminated, or suspended in whole or in part and the Contractor may be declared ineligible for further contracts.

SPECIFICATIONS CORSAIR:

- 1.01 Number of pages: 8 Pages, Self Cover
- 1.02 Final Page Size: 10.5 x 12.5
- 1.03 Paper: Husky Offset Text Smooth\*\* 012970, White, 60#
- 1.04 Ink: 4/4
- 1.05 Proofs: PDF Proof is required. Art provided by The Corsair
- 1.06 Bindery: Trim, fold
- 1.07 Bleed: No
- 1.08 Quantity: 3500 each issue, 8 issues per year
- 1.09 Mailing Service: No. Delivery to Pensacola State College, Pensacola Campus.
- 1.10 References: Provide at least three (3) references, for which your firm has printed newsletters, with the response. References shall include names, email addresses and telephone numbers. Pensacola State College may request previously printed material by your firm.
- 1.11 Publishing Schedule: Successful vendor will receive 1<sup>st</sup> order artwork by August 14<sup>th</sup>, 2014. Printer must deliver 1<sup>st</sup> order by August 19<sup>th</sup>. Scheduling of subsequent orders/issues will be done with the successful vendor.

QUOTATION FORM

<u>Quantity</u>	<u>Description</u>	<u>Price</u>
3,500 per Issue 8 Issues per Year	Corsair Paper	\$ Per Year

QUOTATION SUBMITTED BY:

\_\_\_\_\_

FEDERAL TAX I.D. NUMBER

\_\_\_\_\_

FIRM OR ENTITY

\_\_\_\_\_

ADDRESS

\_\_\_\_\_

CITY, STATE & ZIP CODE

\_\_\_\_\_

TELEPHONE NUMBER/FAX NUMBER/EMAIL ADDRESS

\_\_\_\_\_

TYPED OR PRINTED NAME OF REPRESENTATIVE

\_\_\_\_\_

SIGNATURE OF REPRESENTATIVE

\_\_\_\_\_

DATE

REFERENCES

Bidder Name: \_\_\_\_\_

1. \_\_\_\_\_  
COMPANY NAME CONTACT PERSON

\_\_\_\_\_  
EMAIL ADDRESS PHONE NUMBER

\_\_\_\_\_  
DATE OF LAST SERVICE PROVIDED

2. \_\_\_\_\_  
COMPANY NAME CONTACT PERSON

\_\_\_\_\_  
EMAIL ADDRESS PHONE NUMBER

\_\_\_\_\_  
DATE OF LAST SERVICE PROVIDED

3. \_\_\_\_\_  
COMPANY NAME CONTACT PERSON

\_\_\_\_\_  
EMAIL ADDRESS PHONE NUMBER

\_\_\_\_\_  
DATE OF LAST SERVICE PROVIDED