# Student Activities Oral Bid Form

Organization: ____________________________  Date: ____________________________

**BIDDING INFORMATION:**
*Type or Print all requested information. Specific Item(s) to be bid (including model name number, ect.)*

Total Amount Approved by Funding Committee: $ ____________________  

Bid Requested by: ____________________________  
Club Officer

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**BID A:**
- Company Name: ____________________________  
- Address: ____________________________  
- Contact Person: ____________________________  
- Telephone #: ____________________________  Amount of Bid: $ ____________________

**BID B:**
- Company Name: ____________________________  
- Address: ____________________________  
- Contact Person: ____________________________  
- Telephone #: ____________________________  Amount of Bid: $ ____________________

**BID C:**
- Company Name: ____________________________  
- Address: ____________________________  
- Contact Person: ____________________________  
- Telephone #: ____________________________  Amount of Bid: $ ____________________
POLICY SD.021

STUDENT TRAVEL ARRANGEMENTS

This section is to be completed by Student Activities Accounting Office

The following bid has been approved: 

Amount of Bid: $___________ Date Approved: __________ Approved By: __________