

**CHAMPAIGN COMMUNITY UNIT SCHOOL DISTRICT NO. 4  
Champaign, Illinois**

**PROPOSAL FORM**

**SAMSUNG CHROMEBOOKS, ACAD GOOGLE CHROMEOS MANAGEMENT  
LICENSES PLUS THREE-YEAR SUPPORT, AND LAPTOP/NETBOOK STORAGE  
CARTS**

Having read the Request for Proposal issued by Champaign Community Unit School District No. 4 and understanding the same, I, on behalf of \_\_\_\_\_, hereby submit this Proposal Form and agree to provide the requested Equipment/Supplies to said School District, 703 S. New Street, Champaign, Illinois 61820, in accordance with the provision of said Request for Proposal and on the terms stated herein. I acknowledge that the District reserves the right to reject any and all proposals, to award a Contract in accordance with the terms of Said Request for Proposal and to waive any informalities, irregularities or defects in any proposal, should it be in the best interests of the School District to do so. Accordingly, I, on behalf of \_\_\_\_\_, submit the following proposal of said Chromebooks, ACAD Google ChromeOS Management Licenses plus Three-Year Support, and Laptop/Storage Carts.

<u>EQUIPMENT/SUPPLIES</u>	<u>UNIT PRICE</u>	<u>TOTAL COST</u>
568 New Samsung Chromebook XE303C12 Computers	\$ _____	\$ _____
568 ACAD Google ChromeOS Management Licenses, Plus Three-Year Support	\$ _____	\$ _____
18 New Spectrum mLT30 Mini Laptop/Netbook Storage Carts	\$ _____	\$ _____

**ADDENDA ACKNOWLEDGEMENT:**

The undersigned acknowledges receipt of the following addenda. If all addenda are not acknowledged, this bid will be considered irregular.

Addendum No. \_\_\_\_\_ through \_\_\_\_\_.

CHAMPAIGN COMMUNITY UNIT SCHOOL DISTRICT NO. 4

Champaign, Illinois

**PROPOSAL FORM**

**SIGNATURE AUTHORIZATION**

IF AN INDIVIDUAL:

Signature of Bidder \_\_\_\_\_

Business Address \_\_\_\_\_

\_\_\_\_\_

Business Phone No. \_\_\_\_\_

Business Fax No. \_\_\_\_\_

IF A PARTNERSHIP:

Firm Name \_\_\_\_\_

Signed By \_\_\_\_\_

Business Address \_\_\_\_\_

\_\_\_\_\_

Business Phone No. \_\_\_\_\_

Business Fax No. \_\_\_\_\_

IF A CORPORATION:

Corporate Name \_\_\_\_\_

Signed by \_\_\_\_\_

President

Business Address \_\_\_\_\_

\_\_\_\_\_

Business Phone No. \_\_\_\_\_

Business Fax No. \_\_\_\_\_

Attest \_\_\_\_\_

Secretary