

CHAMPAIGN COMMUNITY UNIT SCHOOL DISTRICT NO. 4
Champaign, Illinois

PROPOSAL FORM

**DELL CHROMEBOOK 11 COMPUTERS, ACAD GOOGLE CHROMEOS
MANAGEMENT LICENSES, SERVICE FOR ALL CHROMEBOOKS, SPECTRUM
CLOUD32 CHROMEBOOK CARTS, AND SERVICE FOR ALL 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, Service for said Chromebooks, Carts and Service for Carts.

<u>EQUIPMENT/SUPPLIES</u>	<u>UNIT PRICE</u>	<u>TOTAL COST</u>
2500 New Dell Chromebook 11 Computers	\$ _____	\$ _____
2500 ACAD Google ChromeOS Management Licenses	\$ _____	\$ _____
Service for 2500 New Dell Chromebook 11 Computers	\$ _____	\$ _____
89 New Spectrum Cloud32 Chromebook Carts	\$ _____	\$ _____
Service for 89 New Spectrum Cloud32 Chromebook Carts	\$ _____	\$ _____

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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 _____.

Place an "x" next to each that applies:

_____ Minority-owned Business Enterprise (MBE)

_____ Female-owned Business Enterprise (FBE)

_____ None of the above

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. _____

CHAMPAIGN COMMUNITY UNIT SCHOOL DISTRICT NO. 4
Champaign, Illinois

IF A CORPORATION:

Corporate Name _____

Signed by _____

President

Business Address _____

Business Phone No. _____

Business Fax No. _____

Attest _____

Secretary