| Vendor Tol | Page of | | | | |
|---|--|---------|--|--|----------------------|
| Funding Year Official Vendor Tour Date | | | FORM 470#: Allowable Contract Date: BID DEADLINE DATE | | |
| * All bidders mu * No bidder can * There are no s bidders know wh * With limited ex * Vendor questi | est be treated the same have advance knowledge coerrets in the process - such at is required of them. Acceptions, service providers ons must be addressed and | of that | the project information as information shared with and potential service provi all vendors should receive | n one bidder but not w ders cannot give gifts the same questions/a | to applicants. |
| * The value of FI | r a one time reply to all ve REE SERVICES (price reduction cost of funding reque | ctio | ons, promotional offers, "f | | enerally be deducted |
| | PROJECT OBJECTIVE: | | | | |
| SPIN# (IF AVAILABLE) | VENDORS ARE: VENDOR NAME | | CONTACT NAME | PHONE | <u>EMAIL</u> |
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| Funding Year | | FORM 470#: Allowable Contract Date: | | | | | | | | | |
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| | | | VEN | DOR RESPONS | SE INFORMATIC | ON ² | | | | | |
| FORM 470 ¹ Product, Service or Project | DATE | VENDOR | SPIN# , (IF | | PHONE OR EMAIL | COMMENTS & NOTES: METHOD OF CONTACT | FRN# ³ | | | | |
| TELECOMMUNICATIONS (WA | | | <u>AVAILABLE)</u> | CONTACT NAIVIE | PHONE OR EIVIAIL | (bid, walk-through, email, phone call) | FRIV# | | | | |
| ILLECOMMONICATIONS (WA | AIN, FOINT TO F | | | T | T . | | | | | | |
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| Bid log Comments, if needed: (disqualification of vendors and reason) | | | | Notes: USAC may request this information at a later date such as during PIA or selective reviews or requests for SPIN changes and/or Service Substitutions. ¹ Include every service listed on the FORM 470. If service will be split into separate FRN's, insert additional lines ² An existing service provider can be considered a bidder based on current rates and services. If an existing vendor does not submite a new bid, enter "N/A" in the date column and "Existing Provider" in the comments column. ³ Enter FRN number after FORM 471 application is filed and funding requestes numbers are assigned. | | | | | | | |
| Recorded By: | | | | | | | | | | | |
| Title: | | | | | | | | | | | |
| Date: | | | | | | | | | | | |

E-Rate Bid Response Log - Priority One

Page ____ of ____

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| Funding Year | | FORM 470#: Allowable Contract Date: | | | | - | | | | | |
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| FORM 470 ¹ | | | | ENDOR RESPO | NSE INFORMAT | | | | | | |
| Product, Service or Project | DATE | VENDOR | <u>SPIN# , (IF</u> AVAILABLE) | CONTACT NAME | PHONE OR EMAIL | COMMENTS & NOTES: METHOD OF CONTACT (bid, walk-through, email, phone call) | <u>FRN#</u> 3 | | | | |
| INTERNAL CONNECTIONS | | <u> </u> | <u> </u> | | <u> </u> | | <u> </u> | | | | |
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| Bid log Comments, if needed: (disqualification of vendors and reason) | | | | Notes: USAC may request this information at a later date such as during PIA or selective reviews or requests for SPIN changes and/or Service Substitutions. ¹ Include every service listed on the FORM 470. If service will be split into separate FRN's, insert additional lines ² An existing service provider can be considered a bidder based on current rates and services. If an existing vendor does not submite a new bid, enter "N/A" in the date column and "Existing Provider" in the comments column. ³ Enter FRN number after FORM 471 application is filed and funding requestes numbers are assigned. | | | | | | | |
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E-Rate Bid Response Log - Priority Two

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| E-Rate Bid Evaluation Worksheet | | | | | | | | | Page | e of |
|--|---------------------------|--------------------------|------------------|-----------------------|---|--|------------------------------|---|--------|---|
| Funding Year | | | | | | | | | | |
| PROJECT OR SERVICE DESCRIPTION | | | | | | | | E COPIES OF THIS FOR RODUCTS OR SERVICES BID. | | |
| VENDOR SCORING (USE ADDITIONAL WORKSHEETS, I | F NECESSARY) | | | | | | | | | |
| BID DEADLINE DATE | , | VENDOR: |] | VENDOR: | | VENDOR: | | VENDOR: |] [| VENDOR: |
| / | | SPIN# | 1 | SPIN# | 1 | SPIN# | 7 | SPIN# | 1 1 | SPIN# |
| DATE RECEIVED | | / / | | / / | | / / | + | 1 1 | | 1 1 |
| ERATE ELIGIBLE AMOUNT | | <u> </u> | | ¢ | | ¢ | | <u> </u> | | ¢ |
| TOTAL BID AMOUNT | | \$ | | \$ | | \$ | | \$ | | \$ |
| SELECTION CRITERIA (may edit criteria & points - except for PRICE) | POINTS AVAILABLE | POINTS AWARDED | | POINTS AWARDED | | POINTS AWARDED | | POINTS AWARDED | | POINTS AWARDED |
| BID PRICING (based on eligble amount) | 40 | | | | | | | | | |
| Prior Experience with the vendor - responsiveness or references Ineligible cost factors (for 15 points = no ineligible amounts; deduct points for not eligible products and services based on price) Company or Management qualifications Proposal documentation meets the minimum requirements as requested Availability, Local or In-State vendor (radius to location, scheduling, etc.) | 15 15 10 10 5 | | - - - - | | | | _ _ _ _ | | - | |
| Final review or interview of vendor- questions about proposal/contract; Flexible invoicing -USAC credit or refundoptions Other (describe additional details) Other (describe additional details) | 5 | | - - | | - | | | | - | |
| ANY DISQUALIFYING FACTORS CONSIDERED? PLEASE NOTE: DID NOT ATTEND REQUIRED SITE VISIT, BID DEADLINE-SUBMITTED LATE, DOES NOT MEET MINIMUM REQUEST/SPECS, ETC TOTAL POINTS AVAILABLE | 100 | | | | | | _ | | | |
| Bid Evaluation Comments , if needed: (justify and reason) | y cost effect | iveness solution and dis | qual | lification of vendors | required to the second | AC may request this informativests for SPIN changes and/otal points must equal 100. PRICE POINTS CALCULATIONIDER = % x 40 points = * If you choose to add additional describe and assign points - | Price ON = point tional this | e must be the highest weig BEST PRICE PROPOSED / P | tion (| GIVEN PER SERVICE (not already listed); (ALLABLE. |
| Vendor Selected: | | |] | | | | _ | | | |
| Approved By: | | | | I | | | | se explain, justify o | | |

Title:

Date:

reason this winning bid is the most cost effective solution to your school's

By: COLLECT-ED LLC

erate bid request.