

Board of Cooperative Educational Services

of Nassau County

Please fill out the information below and return this form to the attention of
Mr. Michael Perina, Nassau BOCES Administrative Center
71 Clinton Road, Garden City, New York 11530
(516) 396-2240

COMMODITY: 20/21-051 FURNITURE: CLASSROOM AND OFFICE

ANTICIPATED AWARD DATE: / /

Applicable Fee: 450.00

Please Check:

Yes No

I wish to participate. A General Resolution will be forwarded under separate cover after Board approval.

I am interested in receiving a 'download' file of the bid award. I understand the fee will be: \$75.00

SIGNATURE: _____

Assistant Superintendent for Business

Dr. Edwin M. Quezada, Superintendent

Please Print Name Title

Yonkers City School District

Agency/School District

DATE: _____

- Please indicate: Microcomputer Support (MCS)/NASTECH
 Health & Safety Member
 Health Office Member

Phone: (914) 377-7325

Fax: 914-377-8025

5802

CITY OF YONKERS

OFFICE OF EMERGENCY MANAGEMENT

40 S BROADWAY

YONKERS, NY 10701

Att'n: MR. KRISTIAN PALAZOLA

DISTRICTS: NEW REQUIREMENT

In order to obtain accurate district usage please provide the following information:

Projected Annual Expenditure level for

FURNITURE: CLASSROOM AND OFFICE

is approximately: \$ _____

You may base this information on

historical or anticipated allocations.

~ Thank you.