Solicitation Verification Sheet - IFB

Solicitation #: _____

Solicitation Title:_____
(e.g. Linen Services-Coastal Center)

Vendor *(Optional – fill out after Award)*:_____

Item	Verified By	Date
Purchasing Requisition		
SCBO Advertisement (When anticipated cost is $10,000 or above		
Vendor List		
Purchase Order		
Invitation for Bid		
Amendment (If Applicable)		
Bidders Sign-In Sheet		
Bid Tally Sheet		
Award Statement – (File Copy In Awards Notebook)		
Multi-Term Contract Determination (If Applicable)		
Certificate of Liability Insurance		
Complete Bid Package Sent to DDSN		

SAMPLE