## **Quote Request**

Printing of Recertification Packet and Accompanying Envelopes

Quotes due April 10, 2017 @ 2:00 p.m.

Fax to Debbie Norkevicus at (412) 456-5007

#### SCOPE OF WORK

#### Section 8/HCV Recertification Packet:

- Quantity: 1,500 packets
- Cover 4/1 65# Cardstock White Gloss
- Interior (44 pages includes print on both sides ) 4/4 70# offset
- Finished Size: 8.5 x 11 inches
- Finish: Fold, Stitch & Trim
- PDF of Artwork Provided
- Color proof Hard Copy requested
- Example Included in Quote Request

#### Envelope 1:

- Quantity: 1,500 envelopes
- 9" x 12" 24# White Woven Open Ended Envelope
- Print 4/0 (Including HACP Logo and Return Address in Upper left corner and also the HACP Return Address in Center (Addressee Section)
- Example Included in Quote Request

#### Envelope 2:

- Quantity: 1,500 envelopes
- 10" x 13" 24# white Woven Open Ended Envelope
- Print 4/0 (Including HACP Logo and Return Address in Upper left Corner)
- Example Included in Quote Request

\*\*Bid does not include additional work. If additional work is required, vendor must have written approval from HACP prior to work being performed.

Please contact Debbie Norkevicus at 412.456.5000 Ext. 8505 or Debbie.Norkevicus@HACP.org with any questions about the above scope.

# **Quote Request**

### Printing of Recertification Packet and Accompanying Envelopes

Quotes due 4/10/2017 @ 2:00 p.m.

#### Contract award will be based on lowest total bid amount

Cost for Section 8/HCV Recertif	fication Packet: \$
Cost for Envelope 1:	\$
Cost for Envelope 2:	\$
Total Bid amount for a	all work: \$(add the above amounts together)
	(add the above amounts together)
Total Bid amount:	dollars
	In words
Contract	award will be based on total bid amount
	(Please print clearly)
Company Name:	
Address:	
/ldd10001	(of company)
Signature:	
Print Name:	
<u> </u>	(of person signing)
Phone Number:	Fax:
Email:	