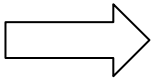


Quote Request

Lunches for Tenant Council Forum Meetings January – October 2020

Quotes due December 13, 2019 @ 11:00AM



**Fax to Brandon Havranek at (412) 456-5007 or
email to Brandon.Havranek@HACP.org**

Scope of Work

The HACP is in search of an individual or business that can provide catered meals for Tenant Council Forum meetings on the third Wednesday from January – October (Seven meetings are to be scheduled). Our meeting will be held at Pressley Street High Rise, located at 601 Pressley Street, Pittsburgh, PA, 15212.

Scope of Service for Hot Lunch Meals

Meals are to be delivered and set up at least one (1) hour before meetings start, approximately 11 a.m.

- Example of a meal include: 1 meat or main entrée, 2 sides, salad, dessert, regular and diet beverages, water, rolls/bread and butter, condiments, paper products to include table cloths for food table, plastic utensils, serving utensils and ice.
- Provider will be given the date and location of meetings two (2) weeks prior to event.
- There will be seven (7) Tenant Council Forum Meetings during 2020 which will be held on the third Wednesday of each month. Meetings will not be held in April, July, August, November or December. (Plan for 75 meals per month/meeting – total 525 meals).
- Provider will coordinate services with assigned HACP staff members and must communicate with staff each month to coordinate the menu for each meeting.
- Vendor to submit original invoice immediately after each meeting – with deliver acceptance signature.

Quote should include meal cost and delivery

For more information or questions, please contact Brandon Havranek @ 412-456-5000 x8546 or Brandon.Havranek@HACP.org

Quote Request

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Type of Meeting	No. of People	No. of Meetings	Price Per Person	Total (Price Per Person X No. of People X No. of Meetings)
Tenant Council Forum	75	7		
Set-up Delivery Charge	NA	7	NA	
GRAND TOTAL:				

Total Cost: \$ _____

Total Cost: \$ _____
(in words)

Contract award will be based on lowest responsive and responsible bid amount

(Please print clearly)

Company Name: _____

Address: _____
(of company)

Signature: _____

Print Name: _____
(of person signing)

Phone Number: _____ Fax: _____

Email: _____