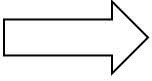


Quote Request

**2025 Hot Lunches for Bedford Choice Resident Leadership Meetings
January – December 2025**



Quotes due January 9, 2025, at 9:00 a.m.

Email bids to loreal.cryder@hacp.org

Scope of Work

Bedford Choice Resident Leadership Meetings

The Housing Authority of the City of Pittsburgh is in search of an individual or business that can provide catered meals for Bedford Resident Leadership Meetings, which will be held monthly from January - December 2025. Our meetings will be held at Bedford Envision Center, 2305 Bedford Avenue, Pittsburgh, PA, 15219.

Meals are to be delivered and set up at least one (1) hour before meeting start, approximately 10 a.m.

1. Example of a meal include: 2 meats or main entree, 2 sides, salad, dessert, regular and diet beverages, water, rolls/bread and butter, condiments, paper products to include tablecloths for food table, plastic utensils, serving utensils and ice.
2. Provider will be given the date and location of meetings two (2) weeks prior to the event.
3. There will be eleven (11) Bedford Choice Resident Leadership Meetings during 2025, which will be held on the third Thursday of each month. (Plan for 30 meals per meeting/month = a total of 330 meals).
4. Provider will coordinate services with assigned HACP staff members and must communicate with staff each month to coordinate the menu for each meeting.
5. Vendor to submit original invoice immediately after each meeting - with delivery acceptance signature.

(11 meetings total)

For more information or questions, please contact Loreal Cryder at
412-643-2785 or loreal.cryder@hacp.org

Quote Request

2025 Hot Lunches for Bedford Choice Resident Leadership Meetings January – December 2025

Quotes due January 9, 2025, at 9:00 a.m.

Quote should include per meal cost and delivery/set-up fee

Type of Meeting	No. of People	No. of Meetings	Price Per Person	Total (Price Per Person x No. of People x No. of Meetings)
Bedford Choice Resident Leadership	30	11	\$	\$
Set-up/ Delivery fee	N/A	11	N/A	\$
GRAND TOTAL				\$

Total Cost: \$ _____

Total Cost: \$ _____
(in words)

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

(Please print clearly)

Company Name: _____

Address: _____
(of company)

Signature: _____

Print Name: _____
(of person signing)

Phone Number: _____ Fax: _____

Email: _____