

**MS Department of Public Safety**

**BID FORM**

**Bid# 3160000390**

**VENDORS ARE REQUIRED TO USE THIS BID FORM**

*(Vendors must mail one original copy to MDPS and submit one electronic copy via MAGIC.)*

**Description**

**Single Item Price**

**CPA200 Semi-Automated Puncher (assembled)**

**\$ \_\_\_\_\_**

**VENDOR INFORMATION (Please Complete All Sections Below)**

**Company Name:** \_\_\_\_\_

**Company Address:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Company Representative Name (Print):** \_\_\_\_\_

**Company Representative Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_