

Lexington County School District One

REQUEST FOR QUOTATION

Date Issued: RFQ # Contact Person: Phone:

ssued: 03/26/2024 RFQ # RFQ2024.4 Person: Melissa Saul Phone: 803-821-1181

E-Mail Address: msaul@lexington1.net

Competitive quotations for furnishing supplies and/or services as described below, delivered **FOB Destination**, freight prepaid. Shipping charges shall be absorbed in the prices and no additional shipping charges shall be added. Requested delivery is 30 days After Receipt of Order (ARO) unless otherwise specified in this quote.

Supplies/Services Delivery Location: Quote/Offeror must be returned to the physical address, faxed, or emailed to the contact person above. Return Quote No Later Than:		Address, City, State, Zip: 948		Information Technology 948 Pisgah Church Rd Lexington, SC 29072		
				Zip: 1 (Lexington School District One 100 Tarrar Spring Rd, Lexington, SC 29072 Melissa Saul	
			4/08/2024 1:00 PM			
Omit Taxes:	Do not include any sales or use tax	x in the quoted p	orices that the D	istrict may	y be required to	pay.
Line Item	ne Item Furnish, Deliver, and Install				nit rice	Total Price
1	Secure Single Sign On Solution Focusing on K-12 Education that includes Analytics and Rostering for 28,000 students		05/01/2024 - 06/30/2024			\$
					Total Price	\$
Award Crite	ria (select one of the following):					
□ Awa	rd will be made to one vendor for a rd will be made by individual line	item.	C 1' 1 1 \			
Offeror Instrucceptable) and or each item on each item on each and/	ng Instructions (add special quoting ictions: Quotes must be submitted shall be returned no later than date quoted, the pricing structure should or services listed above, at the prical xington 1.net/Procurement under Procurement	ed on this form. e/time indicated be as indicated e shown, subject	above; otherw above. The bid to the terms an	se, the que	ote may be cons to supply to Lex	idered non-responsive. ington County School District One
compliance		t to all condition	s the undersign	ed offers a	and agrees to fur	nish the above at prices shown if th
Delivery Time:						
Quote By:			Dat	e:		
Signature:			Pho	ne:		
Vendor Name:			Em	ail:		
Address:			Cit	//State/Zip:		