



THE SCHOOL DISTRICT OF LEE COUNTY

VENDOR BID LIST NOTIFICATION FORM

Procurement Services Department
2855 Colonial Blvd.
Fort Myers, FL 33966
(239) 337-8180

Email: ZoraidaEC@LeeSchools.net

New Notification Form Updated Notification Form

Name of Company _____
 Owner/President _____
 Address _____
 City _____ State _____ Zip _____
 Toll-Free Phone _____ Fax _____
 Website _____ Company E-Mail _____
 Account Representative _____ Phone _____
 E-Mail Address _____ Years in business _____
 Federal EIN # _____ Florida Sales Tax # _____
 Minority Business (Yes/No) _____ Minority Business Type Minority Veteran Women Disabled

Filing of this Vendor Bid List Notification Form supplies information only. It does NOT register you as a vendor with the School District.

As a potential vendor of The School District of Lee County [SDLC], I _____ certify that:
NAME

[A] I am not an employee of SDLC and that to the best of my knowledge and belief, no relative or personal relationship exists which may be a potential conflict of interest between my organization and any employee or agent of SDLC.

[B] A Potential Conflict of Interest may exist between my organization and an employee of SDLC.
Please explain potential conflict on an attached sheet.

Please indicate below the products/services you wish to furnish to the District. When the District issues a BID(s), RFP(s) and/or ITN(s) for the commodities you indicate, the District will attempt to notify you at the email address above.

I certify:

- To the best of my knowledge, the elements of information provided herein are accurate and true as of this date;
- I understand that it is my responsibility to advise the Procurement Department in writing of any changes of information on this form: (i.e. addresses, contacts, phone/FAX numbers, email addresses, classification codes, etc.);
- My organization shall not provide any product or service without first having in our possession an authorized purchase order issued by the District Procurement Services Department. I understand that payment for any product or service provided without an authorized purchase order is NOT the responsibility of the District and that I will be required to obtain payment from the individual requestor; and

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Signature: _____
 Printed Name: _____
 Title: _____
 Date: _____