

QUOTE FORM

RFQ No. TS 2020-09 Travel Services

Office of Hawaiian Affairs
 ATTN: Mr. George Kaeha, Procurement Specialist
 560 N. Nimitz Highway, Suite 200
 Honolulu, Hawai'i 96817

Aloha e Mr. George Kaeha:

The undersigned has carefully read and understand the terms and conditions specified in the Request for Quotes and hereby submits the following offer to perform the work specified.

Date: _____

Respectfully submitted,

 Exact Legal Name of Offeror (*Company Name*)

 Date

 Authorized Signature

 Printed Name of Authorized Signer

 Title of Authorized Signer

 Telephone Number

 Fax Number

 Business Mailing Address

 Hawai'i General Excise Tax Lic. I. D. No

 City, State, Zip Code

 Federal I.D. No. or Social Security:

 Contact Person regarding this quote

 Phone Number (*Contact Person*)

QUOTE Required	TRANSACTION FEE			
	Air	Air/Train	Air and Hotel	Air, Hotel & Ground Transportation
Destination				
Inter-State	\$	\$	\$	\$
Domestic (within USA)	\$	\$	\$	\$
Foreign (Outside of USA)	\$	\$	\$	\$

Please provide answers for the following with either Yes or No	Indicate Yes or No
Required Office in Hawaii	
Office Days and Hours: (i.e. Monday thru Friday, 7:45 a.m. to 4:30p.m).	
Required After hours services – available	
Payment by Purchase Order	
Payment by PCard	