

**Northern Illinois Independent Purchasing Cooperative
Contractor Information Sheet**

Name of Company Preparing RFP: _____

Street Address: _____

City, State, Zip: _____

Telephone Number: _____ Fax Number: _____

Web Address for Vendor: _____

Name of Person Submitting RFP: _____

E-Mail Address – Person Submitting: _____

Vendor Contact Information:

Contact Person: _____

Phone Number: _____

Street Address: _____

City, State, Zip: _____

E-Mail Address: _____

I do hereby affirm that I am duly authorized as a representative of the stated corporation to legally offer the RFP as stated. The offer as stated is guaranteed to remain in effect until

(Date)

Signed: _____

(Use Blue Ink)

Date: _____