

## Horseshoe Bend School District Sealed Bid Form

Item Tit	le / Description	Bid Amount
I, the undersigned, offer and	agree to purchase the item	designated above at the price
indicated in the Bid Amount	field above.	
Bidders Name:		Date of Bid:
A dalagas.		
Address:		
Citv:	State:	Zip Code:
,		
Phone Number:	E-Mail (optio	onal):
Place this completed form in	a sealed envelope marked "	'SEALED BID", and submit to the
address below, either by mai	l or hand-delivery.	
ATTN: Mary Hanson		
Horseshoe Bend School Distr	ict	

Horseshoe Bend School Districtions 398 School Dr.
Horseshoe Bend, ID 83629
208-793-2225