

**North Colonie Central Schools  
Purchasing Contact Form**

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Tax ID #: \_\_\_\_\_

Bid(s) of Interest: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Upon completion of Contact Form, please mail to:*

*North Colonie Central Schools  
Attn: Purchasing Department  
91 Fiddlers Lane  
Latham, NY 12110*