



**LINCOLN UNIVERSITY  
PURCHASING DEPARTMENT  
INVITATION FOR BID (IFB)**

AMENDMENT NO: 001  
 IFB NO.: B19-1159  
 TITLE: Professional Handheld Camcorder with Accessories  
 ISSUE DATE: November 7, 2018

REQ NO.: 121938  
 BUYER: Michael Rothermich  
 PHONE NO.:(573) 681-5417  
 E-MAIL: [rothermichm@lincolnu.edu](mailto:rothermichm@lincolnu.edu)

**RETURN BID NO LATER THAN: November 16, 2018 AT 2:00 P.M. CENTRAL TIME**

**MAILING INSTRUCTIONS:** Print or type **IFB Number** and **Return Due Date** on the lower left hand corner of the envelope or package. Proposals must be in the Lincoln University Purchasing Department (1002 Chestnut St, Room 101) by the return date and time

(courier service)  
**RETURN BID TO: LINCOLN UNIVERSITY  
 1002 CHESTNUT ST  
 SHIPPING & RECEIVING BLDG  
 JEFFERSON CITY MO 65101**

**CONTRACT PERIOD: N/A**  
**IFB B19-1159 IS HEREBY AMENDED WITH THE FOLLOWING ADDITION:**  
ADD TO TECHNICAL SPECIFICATIONS:

Panasonic AG-AC30 or Equivalent. This information is provided for informational purposes only and is not intended to limit open competition.

The bidder hereby declares understanding, agreement and certification of compliance to provide the items and/or services, at the prices quoted, in accordance with all requirements and specifications contained herein and the Terms and Conditions Invitation for Bids (Dated 04-23-2010). The bidder further agrees that the language of this IFB shall govern in the event of a conflict with his/her bid. The bidder further agrees that upon receipt of an authorized purchase order from Lincoln University or when this IFB is countersigned by an authorized official of Lincoln University, a binding contract shall exist between the bidder and Lincoln University.

**SIGNATURE REQUIRED**

AUTHORIZED SIGNATURE		DATE
PRINTED NAME		TITLE
DOING BUSINESS AS (DBA) NAME		LEGAL NAME OF ENTITY/INDIVIDUAL FILED WITH IRS FOR THIS TAX ID #
MAILING ADDRESS		IRS FORM 1099 MAILING ADDRESS
CITY, STATE, ZIP CODE		CITY, STATE, ZIP CODE
VENDOR NO. (IF KNOWN)	TAXPAYER ID NUMBER (TIN)	TAXPAYER ID (TIN) TYPE (CHECK ONE) <input type="checkbox"/> FEIN or <input type="checkbox"/> SSN
VENDOR TAX FILING TYPE WITH IRS (CHECK ONE) <input type="checkbox"/> Corporation <input type="checkbox"/> Individual <input type="checkbox"/> State/Local Government <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Other		
CONTACT PERSON		E-MAIL ADDRESS
PHONE NUM BER.		FAX NUMBER

**NOTICE OF AWARD (LINCOLN UNIVERSITY ONLY)**

ACCEPTED BY LINCOLN UNIVERSITY AS FOLLOWS:		
CONTRACT NO.		CONTRACT PERIOD
BUYER	DATE	PURCHASING DIRECTOR