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Post a Solicitation

Use this form to submit a legitimate request for bids, request for proposals, request for information or other procurement solicitation for goods and services. Provide as much detail as possible, including bid due date, specifications, quantity needed, delivery location, etc.. If you want to attach bid documents include a URL where we can download them from or ask us for an email address where you can send them.

Do NOT use this form to submit promotional information about your company. You may use our free classified ads for that.

For assistance call us at 302-450-1923. Please allow up to 12 business hours for your solicitation to be distributed. Once your solicitation has been published we will send you via email the URL where your ad can be found.

If you make frequent purchases contact us about using our free and easy to use e-procurement solution.

Please do not use this form to submit promotional information on your organization. This form is only for bid advertisements (procurement solicitations) for goods and services.

*Highlighted input fields are required.

| Organization Name: | Sheriffs' Association of Texas | | | |
|--------------------|--|---|----------|--|
| Contact Name: | Kaylyn Mitman | | | |
| Address: | 1601 S. Interstate 35 | | | |
| City: | Austin | | | |
| Country | United States | ~ | | |
| State/Province | Texas | | ~ | |
| Zip: | 78741-2503 | | | |
| Phone: | (919) 459-6471 | | | |
| Fax: | | | | |
| E-mail: | kmitman@ncsheriffs.net | | | |
| Website | https://www.txsheriffs.org/procurement | | | |
| Details: | All dealers must reginttps://www.myvend The Pre-Bid Confere RSVP to kmitman@ - Stellantis: 10:00 ar - Ford: 11:30 am - 12 - General Motors: 2: The bid period will o | Dates: Nover ister to partic orlink.com/co ences will be nosheriffs.ne m - 11:00 am 2:30 pm EST 00 pm - 3:00 pen on Septe 2023. All bid | | |





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Thank you for your submission.

We will contact you to confirm the submission and

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*Highlighted input fields are required.

| Organization Name: | |
|--------------------|--------------------------------|
| Contact Name: | |
| Address: | |
| City: | |
| Country | United States |
| State/Province | Select State / Prov (required) |
| Zip: | |
| Phone: | |
| Fax: | |
| E-mail: | |
| Website | http:// |
| Details: | |
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