

**Exhibit One**

**Beaufort County Schools**

**REQUEST FOR BID**

**COMPLETED BY SCHOOL**

Destination: \_\_\_\_\_ Dates: Depart \_\_\_\_\_ RTN \_\_\_\_\_

Arrival Time: \_\_\_\_\_ Return Time: \_\_\_\_\_  
(Destination Arrival Time)

School Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_

School Phone: \_\_\_\_\_ School Fax: \_\_\_\_\_

No. Students transporting: \_\_\_\_\_ No. Chaperones transporting: \_\_\_\_\_

Departing / Return location: \_\_\_\_\_

Additional services, such as tours, meals, & lodging: \_\_\_\_\_

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

Other Information: \_\_\_\_\_

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

**COMPLETED BY CARRIER**

No. Buses: \_\_\_\_\_ No. Drivers: \_\_\_\_\_

Load Time: \_\_\_\_\_ Departure Time: \_\_\_\_\_  
(Beginning Trip - School Location) (Departing Destination for return)

Number of miles one-way \_\_\_\_\_ roundtrip: \_\_\_\_\_

Total Trip Cost: \_\_\_\_\_