

# Attachment 8

## Alternative item Request Submission – 2019 Grocery Bid

Please complete and return this form via email by the date noted in the Bid Specifications to request consideration of these items as equal. Please submit nutritional information, ingredient list, and CN data or product formulation sheets, if appropriate.

	Item on Bid			Proposed Alternative			
	Bid Line	Item Name	Brand	Item Name	Brand	Manufacturer Item Number	Pack Size
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Date