OWNER BUILDER NETWORK BID SELECTION WORKSHEET TRADE

Sub	Contractor #1:		Contact:		
	Address:		Email:		
	Phone:	Cell:	Email: Fax:		
	Referred by:		Date of Initial Contact:		
	Contacted via:		Date of Initial Contact: Date Bid Received:		
	Bid Amount:		Budget Amount:		
	+/- Budgeted Amount:		Budget Amount: Selected: Yes	No	
	Comments:				
Sub	Contractor #2:		Contact:		
	Address:		Email:Fax:Date of Initial Contact:Date Bid Received:		
	Phone:	Cell:	 Fax:		
	Referred by:		Date of Initial Contact:		
	Contacted via:		Date Bid Received:		
	Bid Amount:		Budget Amount:		
	+/- Budgeted Amount:		_Budget Amount: Selected: Yes	No	
	Comments:				
Sub			Contact:		
	Address:		Email:		
	Phone:	Cell: _	Fax:		
	Referred by:		Date of Initial Contact: Date Bid Received:		
	Contacted via:		_ Date Bid Received:		
	Bid Amount:		Budget Amount:Selected: Yes		
	+/- Budgeted Amount:		Selected: Yes	No	
	Comments:				

