



RFP #22-062604AS  
Submission Questionnaire

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

Corporate Address \_\_\_\_\_

Local Office \_\_\_\_\_

Contact Person \_\_\_\_\_

Contact Email \_\_\_\_\_ Phone \_\_\_\_\_

Accounts Payable Contact \_\_\_\_\_

Payment Address \_\_\_\_\_

Payment Email \_\_\_\_\_ Phone \_\_\_\_\_

Can payments be made through ACH? \_\_\_\_\_

Do you accept invoice payment via school credit card? \_\_\_\_\_

If yes, will you charge an additional fee or percentage? \_\_\_\_\_ If yes, what is the fee or percentage? \_\_\_\_\_

**Company Profile**

Year Incorporated/Organized \_\_\_\_\_ Number of Employees \_\_\_\_\_

Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Sole Proprietorship \_\_\_\_\_ Other \_\_\_\_\_

Emergency Contact & Phone \_\_\_\_\_

Days and Hours of Operation \_\_\_\_\_

**Dripping Springs Contact Information**

HCISD – Accounts Payable

To Request Hays CISD Tax Exemption

Invoicing Email [accounts.payable@hayscisd.net](mailto:accounts.payable@hayscisd.net)

email: [anston.shockley@hayscisd.net](mailto:anston.shockley@hayscisd.net)

By mail HCISD – Accounts Payable  
21003 IH 35  
Kyle, Texas 78640

Phone (512) 268-2141