**ANEXO III  
(Modelo de proposta)**

Documento em papel timbrado

Razão Social: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
CNPJ: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Data: \_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_\_\_\_/ \_\_\_\_\_\_\_\_\_\_\_\_  
Nome do responsável: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Documento de identificação do responsável: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Item** | **Descrição dos Insumo e Materiais** | | **Marca ou Modelo de Referência** | **Quantidade** | | | **Unidade de medida** | | **Valor unitário** | | | **Valor total** | | |
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| **TOTAL R$** | | | | | | | | | | |  | | | |

Declaro estar de acordo com o Termo de Referência e respectivos anexos disponíveis para a Dispensa Eletrônica nº 90256/2024.

Assinatura do responsável