

This form must be completed for any requisition issued for **\$5,000 or higher**.
The completed form shall be submitted to the Purchasing Department, prior to placing the order.
Purchase Orders will be held pending this forms approval.

VENDOR NAME: _____ **DOLLAR AMOUNT:** _____
REQUESTED BY: _____ **REQUISITION/PO #:** _____
SUBMITTAL DATE: _____

PART 1 – EXEMPT

Is this an exempt purchase? YES (check reason below and submit form) NO (proceed to part 2).

If Yes, please check appropriate item.

- Board Approved Text Book
- Utilities
- Employee Benefits Programs
- Insurance Coverage (please describe: _____)
- Construction/Architects/Consultants
- Emergency Situation (see Policy 6320 **and attach an explanation**)

PART 2 – QUOTE

If the purchase is between \$5,000 and the Public Bid Amount (\$24,459 for the 2018-2019 school year), did you obtain 3 quotes?
YES (attach quotes and submit form) NO (complete Part 3)

PART 3 – DETAILED EXPLANATION

1. Is this pricing from a Public Bid or Cooperative Bid? YES (complete information and submit form)
 - What is the public bid Name and #? _____
 - Was the bid approved by the Board? YES NO
 - What is the name of the Cooperative Bid? _____
 - (Attach quote from vendor with the bid identified on the quote).
2. Is this a blanket purchase order? Yes (provide a description of items to be purchased and submit form).
 - Description of items: _____
 - If the PO is over \$22,000, is there a contract on file with the Purchasing Department? YES
 - NO (please contact the Public Buyer prior to issuing a PO).
3. Is this a unique item/service/event? YES (complete information and submit form).
 - Description of purchase: _____
 - Attach additional information if needed.
4. If you could not answer yes to any of the above questions, please attach a detailed explanation of the item being purchased, the method used to obtain pricing, and how the item will benefit the district.

PART 4 – APPROVALS IN BUSINESS PLUS:

By approving the requisition number above that accompanies this form in BusinessPlus workflow, you are acknowledging the information contained herein and believe it to be compliant with School Board, State and Federal Purchasing Policies. When filling out this form, please type your name as your signature in the appropriate section below, then attach this form to the PR record in BusinessPlus before sending to workflow.

Department Supervisor

Assistant Superintendent for Business Services (or proxy)