|  |  |
| --- | --- |
| **Date** |  |
| **Agency/Division** |  |
| **PS Requisition ID** |  |

|  |  |
| --- | --- |
| **Provision Cited per IC 5-22-10** |  |
| **Cost or Value of Purchase or Contract** |  |
| **Supplier Selected** |  |

**Describe the goods/services purchased and justification for use of a special purchasing method.**

**Detail the research done determining this product/service is the best solution for the State.**

**Suppliers Solicited and Their Quoted Prices**

|  |  |  |  |
| --- | --- | --- | --- |
| Supplier 1 Name |  | Supplier 1 Quote | $ |
| Supplier 2 Name |  | Supplier 2 Quote | $ |
| Supplier 3 Name |  | Supplier 3 Quote | $ |
| Supplier 4 Name |  | Supplier 4 Quote | $ |

**Explain why the awarded supplier was chosen.**

**If less than four quotes were sought or obtained, explain how it was determined that the price quoted by the awarded supplier is fair and reasonable.**

|  |  |
| --- | --- |
| Reviewed and approved by Agency Head Procurement Agent: |  |

*Head Procurement Agent Signature*

\*Attach supporting documents or additional justification as needed.