

**AGENCY PURCHASE REQUEST**  
Ohio Department of Administrative Services

Division Tracking No. \_\_\_\_\_  
Agency Tracking No. \_\_\_\_\_

Color Legend :	Work Unit	Business Office	DAS Finance
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Date:	Contact Name:	Contact Number:
Division/Unit:		
Ship To:		Additional Contact(s) Requiring Copy of PO:
Supplier Name:		Total Cost:
Supplier Contact Name:		
Supplier Email:	Supplier Phone Number:	
OAKS Supplier ID Number:		
RFQ/ITB/RFP/Term Contract/Schedule Number:	Account Code(s):	

**REQUEST DESCRIPTION, OBJECTIVES & DETAILS:** (See Instructions on page 4. Use page 3 or attach additional sheets if needed)

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<b>SELECTION PROCESS:</b> Indicate whether purchase is in Division's MBE Projection Plan and status of search for MBE vendors if applicable (See Instructions on page 4. Use page 3 or attach additional sheets if needed)	<b>Sole Source:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, attach documentation)
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MBE Set Aside: <input type="checkbox"/> Yes <input type="checkbox"/> No	MBE Participation: <input type="checkbox"/> Yes <input type="checkbox"/> No	EDGE: <input type="checkbox"/> Yes <input type="checkbox"/> No
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**FUNDING SOURCES(S):** (Use page 3 or attach additional Excel spreadsheet if necessary)

Fund	ALI	Dept.	Program	Agency Use	Grant #	Project ID #	Reporting	Amount

**APPROVALS** (See instructions. If email approved, attach copy of email):

Unit Manager:	Date:
Division Business Manager:	Date:
Division Deputy Director:	Date:
Agency Procurement Officer, CFO or Designee:	Date:

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<b>DIVISION BUSINESS OFFICE USE:</b>			
Controlling Board Number:		Release and Permit Number:	
Additional Information:			

**ADDITIONAL INFORMATION FOR CONTRACTS ONLY:**

**Division Business Office:**

- Finding for Recovery requirement is complete and attached.
- Business Office has confirmed that supplier is not on any State of Ohio or federal debarment list:  Yes  No
- Funds are available.
- If contract extends over both years of a biennium, appropriation is available in both years.
- Controlling Board approval will be necessary:  Yes  No
- Copy of OAKS supplier threshold screen is attached.
- Supplier fiscal year-to-date spending is:

Amount:	
Date:	

**OFFICE OF LEGAL SERVICES**

- DAS model contract or alternative acceptable terms and conditions are used

DAS Legal Services:	
Date:	

**OFFICE OF FINANCE**

- Contract documentation is complete; forward request for DAS Director's signature

Budget Analyst:		Date:	
Chief Financial Officer or Budget Manager:		Date:	



# AGENCY PURCHASE REQUEST

## Ohio Department of Administrative Services

# INSTRUCTIONS FOR COMPLETION OF FORM

### Document Header

- **Division Tracking Number:** Optional, to be assigned by Division Business Office
- **Agency Tracking Number:** To be assigned by DAS Director's Office upon receipt

### General Information

- **Date:** Date of Work Unit Request
- **Contact Name:** Work unit employee to whom questions about this request may be directed
- **Contact Number:** Requestor's telephone number
- **Division/Unit:** DAS Division acronym (e.g., ASD, GSD, OIT) and Unit Name (e.g., State Printing)
- **Ship to:** Where should the item be shipped? (Note, all "Bill to" addresses will be specified as Ohio Shared Services.)
- **Additional Contact(s) requiring copy of PO:** List any names of individuals other than the supplier and requestor who should receive copies of the PO (e.g., project manager).

### Selected Supplier

- **Total Cost:** Total cost of selected supplier quote
- **Supplier Contact Name:** Enter the name of the supplier contact for questions and to receive a copy of the PO.
- **Supplier Contact email and phone:** provide information on how to reach this supplier. All purchase orders will be emailed to the supplier email address provided.
- **OAKS Supplier ID Number:** Work units enter the ID number established in OAKS for this supplier, if known. Business Managers completes if work unit has not done so.

### Contract and Account Code Information

- **RFQ/ITB/RFP/Term Contract/Schedule Number:** enter the state contract number that provides the purchasing authority for this purchase, if applicable.
- **Account Code(s):** Work units enter the OAKS account code(s) for this purchase, if known. Business offices complete before submitting if work unit has not done so.

### Request Description Objectives & Details:

- Provide a description of the goods/services requested. Include explanation relative to division objectives. Include explanation of any zero-cost agreements. Use page 3 or attach additional pages as needed.

### Selection Process

- Describe the procurement process including names of suppliers contacted for a quote. Check the appropriate boxes to indicate if procurement is MBE Set Aside, MBE Participaton, or EDGE. Indicate if this purchase was included on the Division's MBE projection plan. If a planned MBE purchase was made from a non-MBE supplier, include an explanation and a copy of the email request to the Equal Opportunity Division (EOD) and the Development Services Agency (DSA) for names or recruitment of MBE suppliers providing needed goods/services. Attach copies of all quotes and requests for quotes and provide an explanation if lowest quote was not selected. If the supplier is sole source, please explain and provide documentation as needed to clarify (e.g., supplier email explaining sole distributor status or explanation of unique qualifications of individual being awarded a personal services contract). Use page 3 or attach additional pages as needed.

### Funding Source(s):

- **Work units:** provide the OAKS chartfield string(s) for this purchase, if known. Business offices complete if work unit has not done so. Use page 3 or attach additional sheets if cost breakdown exceeds two lines.

### APPROVALS

#### Unit Manager:

- (If required by Division, follow division policy/procedures)

#### Division Business Manager or designee:

- Procurement process conducted in compliance with Ohio Law; Office of Procurement Services procedures and applicable OBM and DAS policies.
- Purchase is consistent with division's MBE plan or explanation has been provided in description of selection process.
- Funding source and account code is appropriate for purchase being made.
- For direct purchases of services costing more than \$500, a contract for Director's signature is attached.

#### Division Deputy Director:

- Expenditure is budgeted and is for a public purpose and is necessary for the performance of an agency function.

#### Agency Procurement Officer, CFO or designee

- Request in accordance with applicable State and DAS procurement policies & procedures.

#### Division Business Office Use

- Division Business Office supplies controlling board number and release and permit number as needed for data entry of the requisition document.

### Additional information for Contracts Only

This section is to be completed if the division is requesting the DAS Director's signature on a new contract. Division business offices are responsible for providing the additional information and routing the contract for DAS Legal Services review before submitting the purchase request package to the DAS Director's Office. The Director's Office will log the request and route to the Office of Finance for final review prior to obtaining the Director's signature.

- Findings for Recovery – Search for the proposed supplier or contractor on the Auditor of State Unresolved Findings for Recovery website <https://ohioauditor.gov/findings.html>. Print and attach the results of the "Certified Search for Unresolved Findings for Recovery" and attach to the agency purchase request package.
- Debarment Lists: Confirm that the proposed supplier is not on the state (ODOT) debarment list or the federal debarment list.
- Copy of OAKS supplier threshold screen is attached – navigate to the OAKS supplier menu and click on the threshold search. Search for total direct spending during the current fiscal year with the selected supplier. Print and attach the results of the threshold search.
- Supplier fiscal year-to-date spending: enter the amount of the direct spending with the selected supplier in the current fiscal year as of the date of the request.