
COOPERATIVE PURCHASING REQUEST, JUSTIFICATION AND APPROVAL

In accordance with *West Virginia Code* §5A-3-19, and *Code of State Rules* 148-1-7.8.a, the Director of the West Virginia Department of Administration, Purchasing Division, may permit a spending unit to engage in cooperative purchasing if the legally mandated parameters are met. Please complete the form below to request that the Purchasing Director review the spending unit's request to engage in cooperative purchasing.

Requesting Agency: _____	Cooperative Contract Name/Number: _____
Agency Contact: _____	Contract Purpose: _____
_____	Estimated Contract Spend: _____

Contract Source (Identify the source of the cooperative contract by checking the appropriate box):

- | | |
|---|---|
| <input type="checkbox"/> Public Cooperative Entity (Ex: NASPO)
List cooperative entity: _____ | <input type="checkbox"/> West Virginia state entity
(Ex: General Services Division)
List state entity: _____ |
| <input type="checkbox"/> Federal Government (Ex: GSA contract) | <input type="checkbox"/> Other Public Body
(Ex: City of Charleston)
List public body: _____ |
| <input type="checkbox"/> State entity other than West Virginia
(Ex: Pennsylvania)
List state entity: _____ | |

Intended Use of Contract (check the box below that applies):

- Single (One-Time) Purchase**
- Join As A Party or Add Spending Unit to Existing Contract (Open End Contract)**
- Lead or Participate In Solicitation for Cooperative Procurement**

Verification Requirements

Proper Award and Availability: Provide documentation verifying that the proposed contract is valid, available for use, and properly awarded.

Financial Advantage to State: Provide documentation verifying that the contract is financially advantageous to the state and is comparable to what can be obtained through competitive bidding.

Existing State Contracts Comparison: In the space provided below, please identify any existing contracts the agency is required to utilize that provide the same or similar service as the proposed contract identified above. If no known contracts fulfill the same or similar purpose, list NONE on line 1 below.

1. _____

Agency Representative:	Purchasing Division Representative
Submitted by: _____	Approved by: _____
Signature: _____	Signature: _____
Date: _____	Date: _____