

Cooperative Purchasing Supplement to Competitive Procurement (Must be accompanied by the Competitive Procurement Form)

Cooperative Agreement Information
Governmental Entity Establishing the Cooperative Agreement:
Name of Cooperative Agreement:
Contact at Sponsoring Governmental Entity
Name:
Phone Number:
Email Address:
Certification this Cooperative Agreement is Available for Use by the State
Certification Attached: ☐ Yes ☐ No
Other Requirements for Use of Agreement (e.g. organizational membership, etc.)
Attach printout and/or indicate (below) the Internet link for requested products or services, including contract pricing.
URL of Link:
Attach printout and/or indicate (below) the Internet link for contract terms and conditions.
URL of Link:
Cost Benefit Justification
Provide narrative and cost-based specifics showing that the use of this cooperative purchasing agreement is in the best
interest of your agency/institution: