

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

**Governmental Entity Establishing the Cooperative Agreement:**

**Name of Cooperative Agreement:**

**Contact at Sponsoring Governmental Entity:**

**Phone:**

**Fax:**

**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. any organizational membership, etc.)**

**Attach printout and/or Internet link for requested products or services, with contract pricing**

**Attach printout and/or Internet link for contract terms and conditions**

**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:**