



## Emergency Purchase Request

<b>Project Title:</b> _____			
<b>Contact Information</b>			
<b>Agency/Institution:</b> _____		<b>Contact Person:</b> _____	
<b>Mailing Address:</b> _____		<b>Phone Number:</b> _____	
		<b>Email Address:</b> _____	
<b>MAGIC Customer #:</b> (only required from state agencies) _____		<b>Division/Dept:</b> _____	
<b>Project Summary</b>			
<b>Description of Project:</b> (Include details of original acquisition if applicable)			
<b>ITS Acquisition Approval (CP-1) should be effective through this date:</b> (Approval expires one year from date of purchase) _____			
<b>Costs</b>			
<b>NOTE : The total purchases shall only be for the purpose of meeting the needs created by the emergency situation</b>			
<b>Indicate MAGIC Contract and/or PO Number:</b> (if one has been issued or created) _____			
<b>Total Lifecycle Cost Estimate/Actual Amount:</b> _____			
<b>Funding Source:</b> <a href="#">Click Here to Select</a>			
<b>Discuss Funding:</b> (e.g. fund number; how much of needed funding is definite; total project budget; any matching or other non-state funds)			
<b>Acquisition Details</b>			
<b>Item or Part Number</b>	<b>Quantity</b>	<b>Description</b>	<b>Building Location(s)</b>
<b>Emergency Purchase</b>			
▶ <i>If applicable, attach a certified copy of the appropriate minutes of the agency's board meeting regarding the emergency purchase.</i>			
<b>Does the situation fall under the definition of an emergency set forth in Section 31-7-1 (f) of the Mississippi Code?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>What happened to cause this emergency?</b> _____			
<b>Does this emergency threaten the health or safety of any person, or the preservation or protection of property?</b>			
<input type="checkbox"/> <b>Yes</b> - In accordance with Section 31-7-13 (j) of the Mississippi Code you may proceed with the emergency purchase and submit this paperwork to ITS after the fact. <input type="checkbox"/> <b>No</b> - You must complete and submit this paperwork to ITS for approval <u>prior to</u> making purchases.			
<b>What would be the negative consequences of following normal purchasing procedures?</b> _____			
<b>Basis for selection of vendor(s) to be used:</b> (What factor(s) affected the decision to choose the vendor? Include other products/vendors researched or evaluated.) _____			
<b>Vendor's proposal attached:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Was a contract executed?</b> <input type="checkbox"/> Yes (please attach) <input type="checkbox"/> No	
<b>MAGIC Vendor Code(s) - Vendor must be in MAGIC before a CP-1 can be issued.</b>			
<b>Place Order To</b>	<b>Vendor Name:</b> _____	<b>Remit To</b>	<b>Vendor Name:</b> _____
<b>Vendor Code:</b> _____	<b>Vendor Address:</b> _____	<b>Vendor Code:</b> _____	<b>Vendor Address:</b> _____

By my signature, I certify that, to the best of my professional knowledge the purchase of the requested products or services is an emergency as outlined in the ITS Procurement Handbook, Rule 207.6: 013-060 Procurement Types: Emergency Purchases, and as outlined in Mississippi Code annotated Section 31-7-13 (j).

\_\_\_\_\_  
Name and Title (Agency Head/Institution President/CIO)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date