	REQUEST FOR CON	ITRACT	LaGov PO#	
Requesting Ofc/Div:		T	ype of Contract	
Division Admin:				
Asst. Secretary:			Request Date	
1. Contractor: Address:	Source & Availability of Funds:	Telephone No: _ Email Address: _		
		LA Dept. Of		
2. Total Amount: <u>\$</u>	Federal: <u>\$</u> Gene		Ma	atch: <u>\$</u>
3.Funding: Amount	Fund Cost Center Ledger		WBS Element	Internal Order No.
Year 1 <u>\$</u>				
Year 2 <u>\$</u>				
Year 3 <u></u>				
4. Project Manager:		_		
5. Contract Term: Justify if more than 12	months:			
6. Title: Objective:				
•	al Costs Incurred 🔲 Fee Schedule		her; specify:	
 A. Scope of Services B. Resumes (1 copy C. Civil Service Form D. Contract Certifica E. Contract Justificat F. Request for Sole 	tion Letter	Reports (type, frequency contracts)		6 months)
Complete	REQUEST FOR Items 1,3, 4, 5, 8, 9, 10, and 11 (as app		PO # in top right co	rner
Reason for	Time Extension – Extend date to:			
TO. Type of Amendment				
	Scope of Services			
	Contract Increase			

11.	E E>	Existing Fed: <sting state:<="" th=""><th></th><th>_ Ir _ Inc</th><th>of Increase: ncrease Fed: crease State: rease Match:</th><th></th><th>Total Fed: Total State:</th><th></th></sting>		_ Ir _ Inc	of Increase: ncrease Fed: crease State: rease Match:		Total Fed: Total State:			
12.	Additio	nal Funding	Source(s):		General					
	ding ear	A reaction to	Fund	Cost Costor	Ledger	Creat No.		Internal Order No.		
		Amount	Fund	Cost Center	No.	Grant No.	WBS Element	Internal Order No.		
Year										
Year										
Year	\$									
	REQUEST FOR RFP									
Complete Items 1, 2, 3, 4, 5, 6, 12, 13, 14, & 15. Provide documents specified in 16 (as applicable)										
13.	(monito Metho	oring plan):	ing progress uring contractor							
14.	Please	indicate cho	ice: 🗌 Pre-prop	osal conference	🗌 Writt	en questions and	lanswers			
15.	Require cost pro	ements for oposal:								
Justification (need for 16. Contract): 17. Documentation must accompany Request for RFP (see Intranet under Contracts page for forms and samples): A. Statement of Work 1. Brief background information (include goals and objectives) 2. Scope of Services (SOS) (tasks to be performed by the Contractor) 3. Progress Reporting (type, frequency, no. of copies) 4. Deliverables (type and time frame) 5. Other terms and conditions (work orders, minimum personnel qualifications, project management requirements DNR responsibilities, measurement and payment, etc.) B. Rate Schedule C. Criteria for evaluation and weights for each D. Cost Benefit Analysis E. Contract Certification Letter										
FOR ADMINISTRATIVE SERVICES USE ONLY										
Acco	ounting A	Approval:				Da	ite:			
			🗌 BA-22	🗌 BA-	-22 Not Applic	able				
Secr	etary Ap	oproval:				Da	te:			