

Washington South Supervisory Union
Northfield and Roxbury School Districts

WSSU GRANT PROCUREMENT - VENDOR COST ANALYSIS FORM

Selected Vendor Name

SECTION I:

Completed by: Name and Position

Date Submitted: Date

Participants: Names of school staff members who assisted with the procurement process

School: Highlight (fill with color) the school to which this purchase relates

K-2	3-5	6-8	9-12	District-wide
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SECTION II:

Rationale for Purchase:

SECTION III:

VENDOR COMPARISON ANALYSIS - ATTACH QUOTES			
Vendor Name	Estimated Cost	Highlight Selected	
		Yes	No
		Yes	No
		Yes	No

If less than 3 vendors identified above (and not sole source), complete this section:

Where Advertised	Dates Advertised	Application Deadline

*Attach copy of advertisement and applications received

SECTION IV:

Rationale for Vendor Selection:

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REQ#	List # Here
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Vendor Selection Process Documentation Form

VENDOR NAME: _____

THIS VENDOR WAS SELECTED FOR (activity/date): _____

TYPE OF PROCUREMENT (highlight one):

Micro Purchase (<\$3,000)	Small Purchase	Noncompetitive (Soul Source)	Sealed Bids	Competitive Proposals	Emergency (Rarely used)
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THIS VENDOR WAS SELECTED FOR THE FOLLOWING REASONS:

VENUE

Cost for Venue: _____

- | | |
|---|---------------------------------------|
| <input type="checkbox"/> Lowest Price | <input type="checkbox"/> Availability |
| <input type="checkbox"/> Location/Accessibility | <input type="checkbox"/> Other: _____ |

CONTRACTED SERVICES

Cost for Service: _____

- | | |
|--|---|
| <input type="checkbox"/> Lowest Price | <input type="checkbox"/> Expertise |
| <input type="checkbox"/> Availability | <input type="checkbox"/> Reputation |
| <input type="checkbox"/> Soul Source Letter (must prove) | <input type="checkbox"/> Resources they can provide |
| <input type="checkbox"/> Follow-up Capability | <input type="checkbox"/> Continuity of Services |
| <input type="checkbox"/> Other: _____ | |

PRODUCTS/SUPPLIES

Cost for Product/Supply: _____

- | | |
|--|---------------------------------------|
| <input type="checkbox"/> Lowest Price | <input type="checkbox"/> Contract |
| <input type="checkbox"/> Availability | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Soul Source Letter (must prove) | |

VENDOR SELECTION REQUIREMENTS:

- Vendor Cost Analysis Form Completed? Yes - attached with all supporting documentation
- Fingerprinting Completed? Yes - approved vendor N/A - signed/written statement attached
- Disbarment Check Completed? Yes

Grant Manager Signature

Date

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GRANT EXPENDITURE CHECKLIST

REQ#

List # Here

NOTE: If this activity has already happened, you cannot submit a requisition to utilize grant funds after-the-fact. The invoice will need to be reallocated for payment from a non-grant funding source. You should contact the Business Manager to ensure the invoice is processed at the local level.

SUBMITTER STEPS

- Document Vendor Selection Process:
 - Advertising or quotes from at least three (3) vendors
 - **Vendor Cost Analysis Worksheet** (with documentation attached)
 - Sole Source Letter (must prove)
 - **Vendor Selection Process Documentation Form** signed by Grant Manager (no stamps)
 - No Procurement: this requisition is for personnel

- Complete Vendor Fingerprinting Requirement (Verify Approved Vendor List)
 - Vendor is on the WSSU Approved Vendor List
 - Vendor is new and has completed vendor fingerprinting forms
 - Grant Manager signed statement attached - vendor has no student contact

- Contract/Stipend Agreement completed (if applicable)
- Sub-grant completed (if applicable)
- Proposed grant expenditure is aligned with grant strategy
- Requested grant funds are available and allowable under grant rules
- Selected funding source and confirmed GL accounting code is correct
- Submit requisition and provide all supporting documentation to Business Manager

Submitter Initials: _____ Date: _____

Business Manager Steps

- Procurement/Fingerprinting documentation is complete (if applicable)
- Contract/Stipend Agreement/Sub-grant documents are correct
- Expenditure aligns with grant strategy and is allowable per grant rules
- Confirm funding is available in grant and accounting codes verified
- Approve requisition and provide this checklist for PO generation
- Assure vendor is not disbarred in www.SAM.gov
- File documentation in Grant Binder with copy of PO after PO is approved

Business Manager Initials: _____ Date: _____