Agency Name		Business Unit Number	Request Date
Contact Person	Telephone Number	Email Address	
State Contract Name			State Contract Number
Purchase Type One-Time Purchase Recurring Purchase		Estimated Purchase Price	
Describe what you need to purchase and exendor you seek to use in lieu of the State process. SUBMITTAL INSTRUCTIONS	Contract. You may be re	equired to submit an Alternate Pro	curement or conduct a competitiv
State agencies and institutions must Procurement Office (SPO) using the access to the SPO Work Request Sy documentation to infospo@nd.gov .	SPO Work Request Setem should email the	<u>ystem</u> . State agencies and ins State Contract Exemption Re	stitutions that do not have quest form and supporting
APPROVAL - OMB STA	TE PROCUREMENT	OFFICE AND ND ITD (if appli	cable) USE ONLY
tep 1: Office of Management and B	udget, State Procure	ment Office Approval	
Comments/Recommended Actions			
Approved Not Approved	If Recurring, Expiration	Date of Contract Exemption	
state Procurement Office Representative	Signature		Date
tep 2 (if required): North Dakota Info	rmation Technology	Department (ND ITD) Appro	val
comments/Recommended Actions			
	ND ITD Bonrocontetina	Nama	
Approved Not Approved	ND ITD Representative	: Naille	
Signature			Date