

Donna Independent School District Sole Source Justification Form

(This form must be attached to the Sole Source Affidavit)

The form must be completed to request approval prior to submitting a requisition for a noncompetitive, sole source proposal. Limit one proposal per form*

Department Name:

Supplier:

Product/Service General Description:

Manufacturer (if applicable):

Model (if applicable):

Estimated Value:

1. Describe the intended use for this product or service:

2. Describe the unique features that make this product or service available only from this supplier:

3. Describe why these unique features are required.

4. Describe the process used to select this product, service or supplier. If applicable, provide supporting documentation including company contact information, product or service information and proposals.

5. Describe the reason(s) for rejecting other products, services or suppliers.

6. Provide supportable evidence that due diligence has been performed in an objective market analysis and proof of fair and reasonable pricing. This may be from: comparable item(s); price based on prior competition (in which case attach a copy of previous purchase order); comparison to a substantially similar item (provide price of the base item, by a catalog and state the cost of additional features); website research; a spreadsheet comparison of competition; proof of sales to others at similar prices.

7. Is this product or service proprietary? Provide documentation showing that the supplier has a patent, copyright, or other legal right which identifies the supplier as a sole provider.

8. **Is this purchase required to match existing equipment or part of a standardization program?** If so, provide the original purchase order number, supplier name and description of the original purchase.

9. **Is this supplier or specific product/service identified by name, statement of work and dollar amount in a sponsored grant or contract?** If so, please describe and attach the grant documentation.

10. **What steps are being taken to competitively bid future purchases?**

Urgent requirements for sole source purchases caused by poor planning or the non-availability of funds will not normally be approved unless the benefits of expediting the request outweigh the harm of restricting competition.

I am *aware of and agree to abide by* the DISD policies and guidelines governing outside interests, conflict of interest and conflict of commitment. I confirm that this disclosure abides by the limits specified in these policies and guidelines and does not interfere with my primary obligation to the District. I do not have, nor does any member of my family, any financial interests in the supplier under consideration.

Requesting Staff Member Signature

Date

Printed Name

Printed Title

Principal, Director, or Department Head Signature

Date

Printed Name

Printed Title

Preparer of Form, Printed Name

COMPLETION OF THIS FORM DOES NOT GUARANTEE THE APPROVAL OF THE PROCUREMENT REQUEST.

PROCUREMENT SERVICES RESERVES THE RIGHT TO COMPETITIVELY BID, NEGOTIATE PRICING OR TO SOLICIT ADDITIONAL INFORMATION AND REMAINS THE FINAL AUTHORITY ON ALL PROCUREMENT ISSUES.

For Purchasing Use

Approved: _____ Denied: _____

Purchasing Agent Signature

***Completion and submission of this form satisfies the requirement in 2 CFR 200.320(f)**