

SOLE SOURCE

UNDER \$25,000

\$25,000 or More

Justification

Division of Procurement
MONTGOMERY COUNTY PUBLIC SCHOOLS
Rockville, Maryland 20850

Date Submitted ____/____/____ Requestor _____ Phone ____-____-____

Requisition # _____ Department/Division _____

Item Description: _____

Suggested Vendor _____ Vendor's Phone ____-____-____

Vendor's Address _____

Contact Name _____ Title _____

Email _____

Please provide a statement to support why this is the only item/vendor that fulfills your need. (Attach any supporting documentation.)

Comment and/or verify if other sources of supply will meet this need:

Vendors Contacted	Vendors Phone Number
1.	
2.	
3.	
Attachments <input type="checkbox"/> Yes <input type="checkbox"/> No	

Requestor (Print) _____ Signature _____ Date ____/____/____

Requesting Department Director (Print) _____ Signature _____ Date ____/____/____

Associate Superintendent (Print) _____ Signature _____ Date ____/____/____

Executive Team Review
(Sole Source will need Deputy Superintendent or Chief Operating Officer and Associate Superintendent of Finance signatures)

Appropriate Team Reviewer: (Chief of Staff, Chief of School Support and Well-being, Chief Academic Officer, Chief Strategic Initiatives, Chief District Operations, Chief Human Resources and Development, or Chief Operating Officer):

Print Name _____ Signature _____ Date ____/____/____

Associate Superintendent of Finance Signature _____ Date ____/____/____

Deputy Superintendent or Chief Operating Officer Signature _____ Date ____/____/____

Division of Procurement

Procurement Signature _____ Date ____/____/____ Amount \$ _____