

**ITB AWARD RECOMMENDATION / INTENT TO AWARD**

**PROCUREMENT SPECIALIST:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**ITB#:** \_\_\_\_\_

**ITEM / SERVICE:** \_\_\_\_\_

Attached are apparent low bid(s) and a tabulation for subject items/services requisitioned by the department.

**RECOMMENDATION:**

A. Which vendor is recommended for Award?

B. Does this meet specifications as per the department's request and as advertised?

YES

NO

If NO, is the variance considered:

MINOR

MAJOR

Explain:

C. Is the recommendation the lowest bid received?

YES

NO

D. List the Bids that are low but DO NOT meet specifications and list reasons why each does not meet specifications:  
attach a memorandum of explanation to this form if necessary.

(Attach an additional sheet if further comment or explanation is required.)

**SIGNATURE:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Chief Procurement Officer or designee

THIS FORM MUST BE COMPLETED FOR ALL AWARD RECOMMENDATIONS OF \$25,000 AND ABOVE.

Over \$25,000

YES

NO