





- b) If this purchase is required to match existing equipment, please provide original purchase order number, supplier name, and description of original purchase.
  
- c) If the service or products are required to match a previous purchase to maintain continuity of research, please provide a detailed explanation.
  
- d) Provide information regarding a collaborative project if it's required that your purchase the same product or service as your collaborator.

5. A statement indicating that the procurement is in the best interests of the state.

The undersigned certifies the above facts and data set forth are complete and accurate.

Preparer's Name and Title:

Signature of Preparer:

Date:

Supervisor's Name and Title:

Signature of Supervisor:

Date: