

Emergency Justification Form

Requisition #: REQ2200184

Date: 8/6/21

Amount of Purchase: \$839.28

EMG: FY2022018

Department: Detention Center

Vendor: Time Keeping Services

This form has been designed to assist all San Miguel County employees in providing information necessary in the processing of an emergency requisition of products and/or services. Please complete and forward to the Finance Department along with your Purchase Requisition.

Departmental Responsibilities:

1. State the reason for the emergency purchase by explaining what the emergency is and/or what caused the emergency situation. **Inmates have destroyed and damaged previous wristbands we had with vendor.**
2. State the financial or operational damage/risk that will occur if needs are not satisfied immediately (do not simply say there will be a loss or some damage): **Staff needs to constantly verify location of inmates through wristbands.**
3. State why the needs were not or could not be anticipated so that goods/services could not have been purchased following standard procedures: **Vendor has serviced the facility and can update/improve/replace wristbands with us.**
4. State the reason and process used for selecting vendor (Attach all quotes/proposals received from other sources, if applicable): **System at the facility is utilizing this system with vendor and has been working well except with faulty wristbands that they are willing to replace with more efficient ones for our facility.**

I certify that the above statements are true and correct, and that no other material fact or consideration offered or given has influenced this recommendation for an emergency procurement.

Submitted by:

Elected Official/Department Supervisor

8/6/21
Date

County Manager

8/6/21
Date

FINANCE DEPARTMENT USE ONLY:

Approved By: _____
Finance Department

Date: 8/6/21

Emergency #: FY 2122-018