

**ISSUING DEPARTMENT INPUT DOCUMENT**  
**CONTRACT/PROJECT MEASURE ANALYSIS AND RECOMMENDATION**

New   
  OTR   
  Sole Source   
  Bid Waiver   
  Emergency   
 Previous Contract/Project No.

Re-Bid   
  Other – \_\_\_\_\_
 LIVING WAGE APPLIES:  YES  NO

Requisition No./Project No.: 
TERM OF CONTRACT  YEAR(S) WITH  YEAR(S) OTR

Requisition /Project Title:

Description:

Issuing Department:    
 Contact Person:    
 Phone:

Estimate Cost/Value: 
GENERAL
FEDERAL
OTHER

Funding Source:

**ANALYSIS**

<b>Commodity Codes:</b>	<input type="text" value="96825"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Contract/Project History of previous purchases three (3) years Check here <input checked="" type="checkbox"/> if this is a new contract/purchase with no previous history.					
	<b><u>EXISTING</u></b>	<b><u>2<sup>ND</sup> YEAR</u></b>	<b><u>3<sup>RD</sup> YEAR</u></b>		
<b>Contractor:</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
<b>Small Business Enterprise:</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
<b>Contract Value:</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
<b>Comments:</b>	<input type="text"/>				
Continued on another page (s): <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					

**RECOMMENDATIONS**

	Set-Aside	Subcontractor Goal	Bid Preference	Selection Factor
<b>SBE</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Basis of Recommendation:

Signed: <input type="text" value="Margarita Velazquez"/>	Date sent to SBD: <input type="text" value="10/18/2022"/>
	Date returned to SPD: <input type="text"/>