

## Contract Processing Worksheet

Program: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Division ID: \_\_\_\_\_ Project ID: \_\_\_\_\_

*To be issued by Contract Specialist*

Contact: \_\_\_\_\_ E-mail: \_\_\_\_\_

Seeking: \_\_\_ New Contract \_\_\_ Renewal/Extension \_\_\_ Amendment

Project Description: \_\_\_\_\_

Proposed Term: \_\_\_\_\_ Months OR From \_\_\_\_\_ to \_\_\_\_\_

### Decision Tree Results:

\_\_\_ Fee for Service \_\_\_ Revenue  
\_\_\_ Interagency \_\_\_ Non-Competitive  
\_\_\_ Sole-Source \_\_\_ Proprietary  
\_\_\_ Delegated Authority  
\_\_\_ RFP \_\_\_ RFI \_\_\_ RFQ  
\_\_\_ Other: \_\_\_\_\_

### Endorsements Needed:

\_\_\_ Renewal/Extension Request  
\_\_\_ Amendment Request  
\_\_\_ Rule Exception \_\_\_ ITSD (STS)  
\_\_\_ DOHR \_\_\_ E-Health  
\_\_\_ Special Contract Request  
\_\_\_ Limitation of Liability

Proposed Contractor: \_\_\_\_\_

\_\_\_ Vendor or \_\_\_ Subrecipient Edison ID#: \_\_\_\_\_

Contact: \_\_\_\_\_ E-mail: \_\_\_\_\_

Contractor Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ FEIN #: \_\_\_\_\_

Section 2: Budget Information

FY	State	Federal	Interdepartmental	Other	Total Contract Amount
<b>TOTAL:</b>					

Speed Chart:

Amendments Only:

Account Code: \_\_\_\_\_

CFDA: \_\_\_\_\_

DA/DG: \_\_\_\_\_

Additional Notes:

Funding Source	Previous Total	Amendment Amount (+ or -)	New Total
State			
Federal			
Interdepartmental			
Other			
Contract Total			

\_\_\_\_\_  
\_\_\_\_\_

Please list any additional personnel you'd like added to Zendesk Ticket:

\_\_\_\_\_

Please list any other department programs this project could affect:

\_\_\_\_\_

Review & Approval:

\_\_\_\_\_  
Program Head

\_\_\_\_\_  
Contract Specialist

*Head of requesting program or division should sign off on worksheet at time of submission in Zendesk*