Idaho Commission on Aging (ICOA)

Large Purchase Request Form



<u>Requestor Section:</u>			
Date:		Requestor Email:	
Name of Agency:		Funding Source #1:	
Purchasing Representative:		Funding Source #2:	
Total cost:		Location of Purchase:	
Attach 3 cost estimates for the piece of equipment you are requesting and indicate here which bid you are choosing:			
(Cost estimates can be bids from vendors/dealerships or print outs of cost from sellers)			
Describe the purpose / intended use of the equipment and how the equipment will benefit the program:			
Include an analysis of lease and purchase alternatives to determine which would be the most economical and practical			
procurement:			
Agency Certification: The information provided above is true and accurate to the best of my knowledge; and is in the best interest of the State.			
Agency Signature:		Date:	
ICOA Section:			
Approval is determined on a case-by-case basis.			
Approved:		ICOA Signature:	
Conditions, if any:		ICOA Printed Name:	
Rejected:		Date:	
Reason rejected:			

Email completed form to: katie.bell@aging.idaho.gov and vicki.yanzuk@aging.idaho.gov