Owner		State Procurement Office, Compliance Unit			
Form N	Number	SPO 106A - Single-Agency C	ooperative Contract Purchase Authorization	Version	11/12/2024
Proces	S	Standard Work / Instruction	for completion of the SPO Form 106A		
Form C	Completion	Process			
Requestor completes Sections I - II and sends to Contract Owner Contract Owner SPA / Deputy SPA completes Section III and sends to SPOCompliance@azdoa.gov Requestor				etes and a to	
No.		Action	Action Detail / Key	/ Points	
Sections I through II to be completed by the requesting State Governmental Unit:					
Sectio	ns I throu	gh II to be completed by the	e requesting State Governmental Unit:		
_	_	gh II to be completed by the ency Request	e requesting State Governmental Unit:		
_	_		e requesting State Governmental Unit: Name of the requesting agency		
SECTI	ON I - Age	ency Request			
SECTI 1	ON I - Age Agency	ency Request	Name of the requesting agency		
BECTI 1 2	ON I - Age Agency Request	ency Request	Name of the requesting agency Name of the requestor		
SECTI 1 2 3	ON I - Age Agency Request Email	ency Request	Name of the requesting agencyName of the requestorEmail of the requestor		
5 SECTI	ON I - Age Agency Request Email Title Telepho	ency Request	Name of the requesting agencyName of the requestorEmail of the requestorJob title of the requestor		
1 2 3 4 5	ON I - Age Agency Request Email Title Telepho	tor ne d B - Background	Name of the requesting agencyName of the requestorEmail of the requestorJob title of the requestor	act title (eProc	urement Label)
1 2 3 4 5 SECTI	ON I - Age Agency Request Email Title Telepho ON II A an	ency Request tor one d B - Background	 Name of the requesting agency Name of the requestor Email of the requestor Job title of the requestor Telephone number of the requestor 	act title (eProc	urement Label)
SECTI 1 2 3 4 5 SECTI 6	ON I - Age Agency Request Email Title Telepho ON II A an Descript	tor d B - Background tion	 Name of the requesting agency Name of the requestor Email of the requestor Job title of the requestor Telephone number of the requestor Description of service(s)/material(s) or Contract 	act title (eProc	curement Label)
SECTI 1 2 3 4 5 SECTI 6 7	ON I - Age Agency Request Email Title Telepho ON II A an Descript Contrac	tor d B - Background tion	 Name of the requesting agency Name of the requestor Email of the requestor Job title of the requestor Telephone number of the requestor Description of service(s)/material(s) or Contration Name of the contractor 	act title (eProc	urement Label)
SECTI 1 2 3 4 5 SECTI 6 7	ON I - Age Agency Request Email Title Telepho ON II A an Descript Contrac Contrac	ency Request tor one d B - Background tion tor t ID	 Name of the requesting agency Name of the requestor Email of the requestor Job title of the requestor Telephone number of the requestor Description of service(s)/material(s) or Contration Name of the contractor eProcurement contract number (if available) 	act title (eProc	urement Label)
SECTI 1 2 3 4 5 SECTI 6 7	ON I - Age Agency Request Email Title Telepho ON II A an Descript Contrac	ency Request tor one d B - Background tion tor t ID	 Name of the requesting agency Name of the requestor Email of the requestor Job title of the requestor Telephone number of the requestor Description of service(s)/material(s) or Contration Name of the contractor eProcurement contract number (if available) Select applicable option: One Time Purchase 	act title (eProc	urement Label)
SECTI 1 2 3 4 5 5 SECTI 6 7 8	ON I - Age Agency Request Email Title Telepho ON II A an Descript Contrac Contrac	ency Request tor one d B - Background tion tor t ID	Name of the requesting agency Name of the requestor Email of the requestor Job title of the requestor Telephone number of the requestor Description of service(s)/material(s) or Contration Name of the contractor eProcurement contract number (if available) Select applicable option:	act title (eProc	urement Label)
SECTI 1 2 3 4 5 5 SECTI 6 7 8	OVI-Age Agency Request Email Title Telepho OVIIA an Descript Contrac Contrac	ency Request tor one d B - Background tion tor t ID	 Name of the requesting agency Name of the requestor Email of the requestor Job title of the requestor Telephone number of the requestor Description of service(s)/material(s) or Contration Name of the contractor eProcurement contract number (if available) Select applicable option: One Time Purchase Full Use of Contract 	act title (eProc	eurement Label)
SECTI 1 2 3 4 5 5 SECTI 6 7 8 8 9	OVI-Age Agency Requesi Email Title Telepho OVIIA an Descript Contrac Contrac Purchas	ency Request tor one d B - Background tion tor t ID	Name of the requesting agency Name of the requestor Email of the requestor Job title of the requestor Telephone number of the requestor Description of service(s)/material(s) or Contration Name of the contractor eProcurement contract number (if available) Select applicable option: One Time Purchase Full Use of Contract Partial Use of Contract		

13	Estimated Spend from the Additional Agency	Forecasted expenditures for the duration of the Cooperative purchase.
14	Description	Description of service(s)/material(s) or Contract title (eProcurement Label)
15	Solicitation ID	eProcurement solicitation number (if available)
16	Estimated Spend of Contract	Forecasted expenditures for the duration of the Cooperative purchase, including the lead Agency
17	Lead Agency	Agency that is running the solicitation
18	Maximum Term	Maximum term allowed by the the contracts terms (including all renewals)
19	A and B: Detail the efforts made to secure a contract for the specific Materials or Services requested and explain why purchasing from a Cooperative Contract (piggyback) is in the best interest of the State per Technical Bulletin 005.	Detail the efforts made to secure a contract for the specific Materials or Services requested and explain why purchasing from a Cooperative Contrac (piggyback) is in the best interest of the State per Technical Bulletin 005.
	A and B: Was the contract awarded through the competitive process? A.A. C. R2-7-1003(B)(1)	Select applicable option:
00		- Yes
20		- No
		- Solicitation Pending
21	A: The Estimated Cost of the Increase (for added agency) exceeds 25% of the estimated cost of the existing contract. In accordance with A.A.C. R2-7-1003 (C) and R2-7-702, the increase is determined fair and reasonable based on adequate price competition and is determined advantageous to the state based upon the justification provided in box 19.	Check the if the Estimated Cost of the Increase (for added agency) exceeds 25% of the estimated cost of the existing contract. In accordance with A.A.C R2-7-1003(C) and R2-7-702, the increase is determined fair and reasonable based on adequate price competition and is determined advantageous to the state based upon the justification provided in box 19.
22	Date of request	Select the date of request from the drop-down calendar
23	Requester Signature	Signature of the authorized requestor

SPO Form 106A Standard Word (Rev 11/24)

SECTION III - Contract Owner Review			
25	Comments, conditions, and restrictions (as applicable)	Complete as needed	
26	I acknowledge that upon approval of SPO Form 106A, the Contract will require an amendment to add the additional agency and the additional agency will need to be added as a user in the state's eProcurement System. This completed form will be included in the request to the help desk.	Click the box to acknowledge that upon approval of SPO Form 106A, the Contract will require an amendment to add the additional agency and the additional agency will need to be added as a user in the state's eProcurement System. This completed form will be included in the request to the help desk.	
27	Print Name	Name of the Contract Owner	
28	Title	Job title of the Contract Owner	
29	Signature	Signature of the Contract Owner	
30	Date of Review	Select the date of review from the drop-down calendar	

31 Contract Owner: Upon completion of Section III, send this signed form to SPOCompliance@azdoa.gov and cc Requestor for processing

Section IV to be completed by SPO:

	Determination	Select applicable option in accordance with A.A.C. R2-7-1001:	
32		- Request Authorized	
		- Request Authorized with Conditions/Restrictions	
		- Request Returned for Additional Information	
		- Request Denied	
33	Approved Expiration Date	Select the date from the drop-down calendar	
34	Comments, conditions or restrictions (as applicable)	Complete as needed	
35	Print name	Printed name of the approver	
36	Date	Select the date of approval from the drop-down calendar	
37	Title	Job title of the approver	
38	Signature	Signature of the approving authority	
Use this	addition section as necessary		
39	Use this additional section as necessary	Section may be used by requesting agency or SPO, in case the fields within the document were insufficient	



Procurement Determination:

Single-Agency Cooperative Purchase Authorization A.A.C. R2-7-1001 and R2-7-1003

SECTIONS I-II MUST BE COMPLETED BY THE REQUESTOR

SECTION I - Agency Request*			
1. Agency			
2. Requestor	3. Email		
4. Title	5. Telephone		
* For limited delegation agencies, please work with your Enterprise Proc	urement Services (EPS) ligican		

 SECTION II.A - Background (if contract is in place)

 6. Description

 7. Contractor

 8. Contract ID

 10. Contracting Agency

 12. Orginal Estimated Total Contract Spend

SECTION II.B - Background (if prior to contract award)			
14. Description			
15. Solicitation ID	16. Estimated Spend of Contract		
17. Lead Agency	18. Maximum Term		

19. A and B: Detail the efforts made to secure a contract for the specific Materials or Services requested and explain why purchasing from a Cooperative Contract (piggyback) is in the best interest of the State per Technical Bulletin 005.

20. A and B: Was the contract awarded through the competitive process? A.A.C. R2-7-1003(B)(1)

21. A: The Estimated Cost of the Increase (for added agency) exceeds 25% of the estimated cost of the existing contract. In accordance with A.A.C. R2-7-1003(C) and R2-7-702, the increase is determined fair and reasonable based on adequate price competition and is determined advantageous to the state based upon the justification provided in box 19.

22. Date of request

23. Requester Signature

24. Requester: Upon completion of Section I and II, send this signed form to Contract Owner listed in the eProcurement System for review

Approval of this request does not allow for agencies to exceed their delegated authority.

TO BE COMPLETED BY THE CONTRACT OWNER

SECTION III - Contract Owner Review

25. Comments, conditions, and restrictions (as applicable)

26. I acknowledge that upon approval of SPO Form 106A, the Contract will require an amendment to add the additional agency and the additional agency will need to be added as a user in the state's eProcurement System. This completed form will be included in the request to the <u>help desk</u>.

27. Print Name	28. Title
29. Signature	30. Date of Review

31. Contract Owner: Upon completion of Section III, send this signed form to SPOCompliance@azdoa.gov and cc Requestor for processing

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SECTION IV - Approval

TO BE COMPLETED BY PROCUREMENT AUTHORITY				
32. Determination				
33. Approved Expiration Date				
34. Comments, conditions or res	trictions (as applicable)			
35. Print name 36. Date				
37. Title	38. Sig	nature		

AGENCY NOTICE: This is an official written determination in response to a procurement authorization request. The original request shall be maintained in the State Procurement Office.

39. Use this additional section as necessary