Statewide Information Technology Procurement Request Form

Complete this form, have it signed by your Agency Administrator/Section Head as delegated by the Agency undersecretary (REQUIRED). Please upload form and email to your agency IT Director as an attachment.

Requester's Name:			
Phone Number:			
Reg. Agcy/Dist/Sect:			
OTS Agency# 815	Reg. Agency Reporting Cat.	Select an RCAT	
Suggested Vendor(s)	Address	Phone#	Total Est. Cost
Request Date:		Need By Date:	

If available please attach quotes or state contract#

Item Description (s)	QTY	Unit Price	Total Cost

Ship To: LA Division of Administration/ Office of Technology Services

Agency	
Attn: (agency liaison or delegate)	
Phone number (area code)	
Address (city & zip code)	

Comments (Please also include a Justification for your request and any agency specific coding as needed)

Approval

Administrator/Section Head Signature:	Date
Admin/Section Head Printed Name:	
Agency IT Director/Liaison Signature:	Date
Agency IT Director/Liaison Printed Name:	

Additional Comments

☐ Buy on Agency PCard, keep receipt documentation and packing slips for monthly PCard Logs!

☐ Scan & email the approved form to:
OTS.Procurement@La.Gov

When items are ordered by OTS Procurement for delivery directly to your location, all signed/dated packing slips must be emailed to both
OTS.Procurement@La.Gov
OTS.Receiving@La.Gov