REPORT OF EMERGENCY PROCUREMENT ACTION
COMAR 21.05.06
Procurement Officer’s Determination

“Emergency” means a sudden and unexpected occurrence or condition which agency management reasonably could not foresee that requires an action to avoid or mitigate serious damage to public health, safety, or welfare.

Department/Procurement Agency: ______________________________________________________

File or ID No.: _________________________________________________________________

Date Dept/Agency first aware of emergency: ___________________________________________

Nature of Emergency: ______________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Date of Solicitation: ____________________________

Number of firms responding to solicitation: _____________________________________________

Name of Firms Responding    Price    Time of Performance
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Name and address of selected vendor: __________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Basis for Selection: __________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

If no competitive solicitation was made, explain: ___________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Date of Contract Award: _____________________________

Term:                                            __________________________________________________________________

Amount:                                          __________________________________________________________________

Fund Source:                                    __________________________________________________________________

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Scope Description:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Category:     _____ Supply     _____ Service     _____ Maintenance     _____ Construction   ______ IT

Contract Type:  _____ Firm Fixed Price   _____ Fixed Price Incentive  _____ Cost Plus Incentive Fee
                _____ Cost Plus Fixed Fee or Cost Reimbursement       _____ Other

Was this action a modification to an existing contract?  _____ Yes   _____No

If yes, provide aggregate amount of contract including all modifications:  ________________________

Detail any other contracts, including modifications, related to abating or avoiding this emergency:

<table>
<thead>
<tr>
<th>Date</th>
<th>Vendor</th>
<th>Amount/ Item(s) procured</th>
<th>Date Reported to BPW</th>
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Remarks:  _____________________________________________________________________________
____________________________________________________________________________________
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I have made this Emergency Determination:

Procurement Officer  _______________________________________________   Date  ________________

Fund Certification:  I hereby certify that funds are available from the appropriation or account indicated in sufficient amount to pay for this procurement.

Dept./Agency Fiscal Officer _________________________________________   Date:  ________________

Dept./Agency head approval of above facts and determination:

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

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