



ATTACHMENT 3

CITY OF COSTA MESA, CALIFORNIA
Purchase Requisition

(Leave Blank for Time Stamp)

Purchase Order Number (Assigned by Purchasing)

Business Unit: CITY Date Requisitioned: 7/12/16
Department: I. T. Division: Comp Systems Dev
Ship To Address:
Contact Person: Steve Phone Number: 4891
Send Copy of P.O. to: [] Contact Person and / or Victoria
[] Request is for Budgeted item(s)
[] Request is for UNBUDGETED item(s)-(Memo Attached)
[] Item(s) Pending Budget Amendment Request #
[] Requesting Sole Source (Justification Form Attached)
[] Fixed Asset Tag Request

Table with 6 columns: Item No., Qty, Unit, Items (Give Full Description: Size, Catalog No. Etc.), Unit Price, Estimated Amount. Row 1: 1, 1, LOT, SOFTWARE MAINTENANCE AND SERVICES RENEWAL, 111,910.01, \$ 111,910.01

If additional lines are needed, please attach a second sheet

Const./Prof. Svs. Agmt. Completion Date:

Sales Tax (8.00%): 0.00

Include Shipping Fee:

Insurance Required: [X] Yes (Certificate attached) [] No

Estimated Total Cost: \$ 111,910.01

Table with 7 columns: Item #, Account, Fund, Dept./Org., Program, Project, Amount. Row 1: 1, 525702, 101, 14600, 50720, , \$ 111,910.01

Comments:

Total \$ 111,910.01

Attached: Vendor's quote.

Proper approvals are required before requisition can be processed.

Suggested Vendor: SUNGARD PUBLIC SECTOR, INC.

Address: 1000 BUSINESS CENTER DRIVE

City, State, Zip Code: LAKE MARY, FL 32725-5585

Phone: 407-304-3322 Fax: 407-304-1277

Vendor's Contact Person: DEAN PAUR

Ordered By: Department Director/Authorized Signature

Approved By: Director of Finance/Purchasing Officer

Approved By: City Manager (when required)

PURCHASING DIVISION USE ONLY
Vendor ID: Buyer: Insurance valid thru
Ship To/Location: Due Date:
Standard Comments: ACC - ALL - ARR - BLA - CON - DCP - DIS - FCA - FCI - FIX - INS - IS - IST - ORG -QTR - REM - SUB - T&C
FINANCE DEPARTMENT USE ONLY
Available Appropriation: [] Yes [] No As of: Confirmed By: