Purchase Requisition County of Webb

WEBB COUNTY SHERIFF'S OFFICE IS JON 20 FM

Requisitioned By

Phone No.

Department

956-523-4500 SUB-STATION 01/14/2016

Reg. Number

Deliver To

Req. Date

(Attach Minutes) Capital Outlay

PURCHAS<u>ING DEPT</u>

Purchase Requisition E-Mail Standard

E-Mail Capital Outlay Requisition

Official's Affidavit

Submitting this form from Appropriate Official's E-Mail Constitutes Signature

\$19,255.90	TOTAL AMOUNT						
	177 177 177 177 177 177 177 177 177 177						
					Standard CAL 2016		
\$2,669.60			\$56.80	47	381-04439 MICROSOFT EXCHANGE	16-939-210	
					SERVER 2012		
\$1,160.90	COMPUTERS RUNNING WINDOWS 7		\$24.70	47	R18-04302 MICROSOFT WINDOWS	16-939-210	
	TYLER SYSTEM REQUIRES						
	SUBTATION, OVER 8 YRS OLD,				PROFESSIONAL 2016		
\$15,425.40	REPLACEMENT OF COMPUTERS AT		\$328.20	47	79P-05582 MICROSOFT OFFICE	<i>O</i> 16-939-210	103 0101 880 16-939-210
AMOUNT	PURPOSE	DATE NEEDED BY	PRICE PER UNIT	orx:	ITEM DESCRIETION	ACCOUNT COMMODITY NUMBER CODE	ACCOUNT NUMBER



Pricing Proposal

Quotation #: |10814448

Description: Microsoft Select Plus - Office(2)

Created On: Dec-29-2015 Valid Until: Dec-31-2015

County of WEBB TX

Joe Gutierrez

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Richard Lettiere

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Phone: Fax:

800-870-6079

Inside Account Manager

512-732-0232

Emait:

Richard_Lettlere@shi.com

All Prices are in US Dollar(USD)

	Product	Qty	Your Price	Total
1	Microsoft Office Professional Plus 2016 Single Language Microsoft Volume License (MVLP) Microsoft - Part#: 78P-05582	47	\$328.20	\$15,425.40
2	Microsoft Windows Server 2012 - License - 1 user CAL - Select, Select Plus - Single Language Microsoft - Part#: R18-04302 Note: DIR-SDD-2503	47	\$24.70	\$1,160.90
3	Microsoft Exchange Standard CAL 2016 Single Language Microsoft Volume License (MVLP) Microsoft - Part#: 381-04439	47	\$56.80	\$2,669.60
		_	Total	\$19,255.90

Additional Comments

DIR-SDD-2503

Please provide end-user contact information (first name, last name, and email address) for all orders. Not including this information may result in a delay in order processing.

Also, please include SHI quote number on your PO. Please contact me if you have any questions.

The Products offered under this proposal are subject to the SHI Return Policy, unless there is an existing agreement between SHI and the Customer.



Webb County Purchase Justification Form

	Funding Sources Requested:					
	XXX Capital Outlay Fund #603-0101-8801:					
	Building Improvement Fund #604-0101-8103					
	Department WEBB COUNTY SHERIFF'S OFFICE Department Head SHERIFF MARTIN CUELLAR					
i	Number of Dept. Employees <u>N/A</u>					

Item	Qty	Qty on Hand	Condition of item being replaced: Poor/Fair/Good	Unit Price	Extended Price
79P-05582 MICROSOFT OFFICE PROFESSIONAL PLUS 2016	47	0	POOR	328.20	15,425.40
R18-04302 MICRSOFT WINDOWS SERVER 2012	47	0	POOR	24.70	1,160.90
381-04439 MICROSOFT EXCHANGE STANDARD CAL 2016	47	0	POOR	56.80	19,255.90

Total Co	ost of item(s) being purchased:	\$ 19,255.90			
Do you	have 3 quotes for all items listed above	? Yes	No_XXX		
running utilize f & Tyler If the p	s the purpose of each item(s) requested ise(s). Tyler needs to run on PC with wing XP and office 2003, Investigations /Pat Fed & State databases unless computer is upgrades surchase is to replace item(s) is the item(dow 7 software. The sure of th	ubstation computers are all be able to produce field reports, e is updated to comply with CJIS		
complia will tak	s the impact or risk potential if we don't ance with CJIS, the officers will not be also longer doing their daily duties. Circle Priority: Critical				
PRIORITY 1: CRITICAL – Required to prevent a critical reduction in service, operating efficiency, economy, and/or safety; to protect valuable property; and/or comply with insurance or code requirements. PRIORITY 2: UPGRADE – Required for significant upgrade in service, operating efficiency, economy and/or safety of current operations. PRIORITY 3: DESIRABLE – Required to Introduce desirable , but optional new service, program, faculty or staff, or to make small improvements in operating efficiency, economy and/or safety.					
Requir	ed with this form:				
	Price quotes Pictures of item(s) to be replaced 5 copies	<u>M</u> 1 Départ	ment Head Signature		

**** Please note this form must be filled out in its entirety for purchase to be considered for approval ****