



State Use suppliers: Use this form to request a product/service addition or a pricing change to an existing product/service on the State Use Procurement Schedule. Complete the form and combine it with all supporting documentation in a single file (one PDF) and email it to sureports@omes.ok.gov for consideration.

The requested products shall not be purchased prepackaged in the case count specified on this form. The State Use supplier must package the products in case counts specified on this form. To comply with the State Use law, the products must be directly manufactured, produced, processed or assembled by the supplier and disabled employees and must add value per 74 O.S. § 3003 (6), (7), (8) and (9).

GENERAL INFORMATION

☐ Add ☐ Change

SUPPLIER INFORMATION

Company name

Address

Contact name

Phone

Email

PRODUCT/SERVICE INFORMATION

Provide a product/service description with key specifications and details that accurately describe the product/service (e.g., usage, dimensions, compatibility, other pertinent or supporting information).

Quantity or count per package/box/case	Unit of measure (box, case, each, etc.)
Requested selling price	Is shipping included in selling price? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is a credit card processing fee included in the selling price? <input type="checkbox"/> Yes (Specify fee percentage: _____%) <input type="checkbox"/> No	
Is the product/service easily comparable on the open market? <input type="checkbox"/> Yes (If yes, list some of the sources.) <input type="checkbox"/> No (If no, describe the reason/difference, etc.)	

REASON TO ADD PRODUCT/SERVICE

1. Has a state agency/political subdivision requested the above-named product/service from you?
☐ Yes ☐ No
2. If Yes on Question 1, can you provide documentation of the request(s)?
☐ Yes ☐ No ☐ N/A
3. If No on Question 1, explain why you want to add the product/service to the contract:

VALUE ADD STATEMENT

Provide a detailed step-by-step description of the labor performed by people with significant disabilities that is applied to this product or service. This description must demonstrate how the product/service meets the core definition of the State Use Program, 74 O.S. § 3003(3).

Please upload at least one photo of the product requested (for comparison).



Fair Market Evaluation Tool

☐ New☐ Revised price☐ Reviewed

Contract #:

Line #:

Comparable source	Selling price	Shipping/other	Total

AVERAGE FAIR MARKET TOTAL WITH SHIPPING INCLUDED (IF APPLICABLE)

SUPPLIER-REQUESTED SELLING PRICE

Is shipping included?

☐ Yes☐ No

Is there a minimum?

☐ Yes☐ No

Is credit card fee included?

☐ Yes☐ No

TOTAL SAVINGS

(difference between supplier-requested price and fair market evaluation)

TOTAL SAVINGS %

FOR OMES USE ONLY

☐ Approved for one-time purchase only☐ Denied

Comments:

State Use contracting officer

Date

Note: The fair market evaluation is conducted with extensive research, meaning that as many comparables were found as possible to determine fair pricing. Some items may only have one or two comparables while others may have numerous. This depends on the complexity of the product/service; a limited number of comparables may be all that could be found in the research.