CONTRACT FISCAL INFORMATION SHEET

Please **complete** this form and attach to the executed contract packet for further processing through LaGov.

Contractor’s Name:

Contractor’s Address:

Contractor’s Telephone #:

Contractor’s Email Address:

Contractor’s Federal ID#:

Contractor’s LDR #:

*(Only required for Personal, Professional, & Consulting Services Contracts)*

Contractor’s Vendor #:

**Contract Amount:** $ **Amendment Amount:** $

**Contract Period:** From To

**Funding Agency:** DCRT,

**Product Category No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SOURCE OF FUNDS:** Line Item Appropriation

State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Percent

Federal \_\_\_\_\_\_\_\_\_\_\_\_\_Percent

Self-Generated\_\_\_\_\_\_\_ Percent

Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Percent

Cost Center

GL Acct

Fund

WBS

Grant

**BRIEF DESCRIPTION OF SERVICES:**

CHECK OFF IF APPLICABLE TO THE CONTRACTOR AND ***PROVIDE THE NECESSARY DOCUMENTATION :***

**\_\_\_\_\_ Public Municipality**

**\_\_\_\_\_ Nonprofit Corporation**

*(Requires Board Resolution of Authority)*

**\_\_\_\_\_ Profit Corporation**

*(Requires Board Resolution of Authority and Disclosure of Ownership)*

**\_\_\_\_\_ Sole Proprietor**

*(Requires statement written on company letterhead/stationary stating that the proprietor is indeed the sole owner and as such has the authority to sign on behalf of the company)*

**\_\_\_\_\_ Out-of-State Corporation**

*(Requires a Certificate of Authority to do Business in Louisiana (from SOS) and a statement to State Procurement about the amount of time the contractor will be physically working in Louisiana if the vendor is not registered with the Louisiana Secretary of State’s Office. Less than 30 days, the vendor does not need to register with the SOS; more than 30 days, vendor must register with the SOS.)*

**\_\_\_\_\_ Out-of-State Contractor**

***(****Requires a statement to State Purchasing about the amount of time vendor will be physically working in Louisiana if the vendor is not registered with the Louisiana Secretary of State’s Office. Less than 30 days, the vendor does not need to register with the SOS; more than 30 days, vendor must register with the SOS.)*

**\_\_\_\_\_ Contractor is a Consultant**

*(Requires resume of the individual contractor, the sole proprietor, or the members of the team assigned to the project)*

**\_\_\_\_\_ Advance Payment**

*(Requires justification from contractor and agency approval)*

**\_\_\_\_\_ Multiyear Contract**

*(Requires agency justification)*

**\_\_\_\_\_ RFP Contract**

**Contract Monitor** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_