



Contract / MOU / Amendment / Grant / Prior Authorization Tracking Form

Please fill in all blanks on this form. If the form is not completed fully and properly, a delay in processing and/or signature by the Secretary may occur. If you have any questions, please contact Fiscal. All documents should be emailed to KDAAgPay@ks.gov.

KDA Contract #

Authorized By

Date Initiated:

Deadline:

Division/Program:

KDA Staff Contact:

Phone Number:

E-mail:

Approval

Is this a new submission? Yes No Period of Performance to

If this is a renewal submission, please include a copy of the current version of the contract.

Program Manager Signature

Fiscal Signature

Legal Signature

Information

Subject / Title of Item

Has the entity/supplier ever been an employee of the State of Kansas? Yes No

If so, when?

If you answered "yes" to the above question, please contact KDA Fiscal for additional assistance before proceeding, unless this is a renewal.

Briefly describe the purpose of this agreement, including deliverables and deadlines. If this includes a Prior Authorization, describe the research completed to ensure that no competition exists, including a list of vendors unable to provide the goods or services.

Funding and Financial

Total dollar amount of the agreement/
contract:

Is KDA receiving money or expending
money?

Receiving
Expending

If KDA is expending funds, what fund
and budget unit?

Additional Notations

Review Comments

Comments made by Fiscal:

Comments made by Legal:

Comments made by Secretary: