

# Procurement Request Form

Arizona Department of Health Services | 150 N. 18th Avenue | Phoenix, AZ 85007

**Please provide the following information to assist in the timely and accurate completion of the services requested.**

Title  
Renewal SPL CTR053734

Reference #  
FY22 - 1342

Bureau  
LICENSING

Contract/Agreement Type  
Unsure

[See a list of Procurement Thresholds and timelines](#)

Description  
Renewal of Contract

*Please ensure Scope of Work is attached to this request.*

Existing Contract Number

Requestor  
Matthew Turgeon

Phone  
623-570-6859

Estimated date needed  
1/1/2022

Program contact  
Matthew Musselman

Program contact phone  
602-364-1367

Other Participants  
[Megan Whitby](#)

All PDS signed?  
No

*Please ensure all PDS forms are attached to this request. [Click here for Procurement Forms.](#)*

Estimated annual amount

0

Funding Available?

Yes

Funding Type

State

If federal funds, are they  
for a sub-recipient  
(6800/9111, ISA, IGA,  
RFGA, etc.)?

No

2 CFR 200.332 Form

No

Select a contract Term

Annual renewal

Suggested suppliers

Informational Notice

*Email this request to the following individuals for informational purposes only*