

3180A Local Purchasing Form (LPF)

Employee's Printed Name	Employee's Building/Department	Date	
Product/Service	Price	Business Name	Business Address

Check the item below that applies to this product/service.

- 1. A similar product or service (of comparable quality) is not available from a Plattsmouth business.
- 2. A similar product or service may be obtained from a business located outside the boundaries of the District with a cost savings greater than 10% AND a Plattsmouth business has been contacted and will not match the identified price. Calculation of cost savings shall include shipping, staff time (salary and benefits) and travel expenses.
- 3. A similar product or service (of comparable quality) is available directly from the manufacturer/supplier AND a Plattsmouth business has been contacted and will not match the identified price.

-If item #1 applies, sign and date the bottom of this form. Submit this form with your purchase order.

-If items #2 or #3 apply, complete the information below regarding the local business. Then, sign and date the bottom of this form. Submit this form with your purchase order.

Business Name	Manager Name	Phone Number	Date/Time Contacted
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Employee Signature	Date
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