



## LEECH LAKE BAND OF OJIBWE CONTRACT REVIEW REQUEST FORM

Date: \_\_\_\_\_

Vendor/Contractor Name: \_\_\_\_\_

Contract Coordinator: \_\_\_\_\_

Account Number: \_\_\_\_\_

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### REVIEWING DEPARTMENTS

<b>LEGAL</b>	APPROVED <input type="checkbox"/>	DISAPPROVED <input type="checkbox"/>
Signature	Date	

<b>ACCOUNTING</b>	APPROVED <input type="checkbox"/>	DISAPPROVED <input type="checkbox"/>
Signature	Date	

<b>LEECH LAKE FINANCIAL SERVICES</b>	APPROVED <input type="checkbox"/>	DISAPPROVED <input type="checkbox"/>
Defaulted loan balance owed:	\$	
Payment arrangement in place:	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Signature	Date	

<b>TERO</b>	APPROVED <input type="checkbox"/>	DISAPPROVED <input type="checkbox"/>
Compliance plan in place:	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Signature	Date	

<b>PURCHASING</b>	APPROVED <input type="checkbox"/>	DISAPPROVED <input type="checkbox"/>
Suspension/Disbarment:	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Statement from Vendor regarding suspension/disbarment from doing business with the Federal Government:	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Signature	Date	

CONDITIONAL APPROVAL/DENIAL: NOTE BELOW (ATTACH SHEET IF NECESSARY)