

Vendor _____ Year: _____ PSC# _____ Log # _____ \$ _____
Division _____ Originator _____ Office Phone: _____

RLC Business Services Check List – For Services **\$1000 and More**

For: ___ Guest Lecturer ___ Performer ___ Professional Services ___ Consultant*

- This form **MUST** accompany paperwork throughout the process. Failure to do so may cause delays.
- All services performed for the college must have pre-approval of the VP or Assoc. VP of Business Services.
- Payment for services which are not pre-approved will be the financial responsibility of the originator.

Please allow three weeks for obtaining all signatures and gathering documents before service is provided.

1. Prior to making contact with any vendors, provide a detailed proposal to Business Services as follows:

- _____ Purpose of contract, including originator's expectations from the vendor
- _____ Date(s) of service
- _____ Expected cost, including any travel, hotel, etc., expenses
- _____ Division and account number to be charged and **signature of appropriate budget manager**
- _____ Signed & dated by originator
- _____ Signed by appropriate dean/director
- _____ Signed & dated by appropriate VP
- _____ ***Signed & dated by President (for consultants only)**
- _____ Countersigned & dated by Vice President or Associate Vice President of Business Services

2. Once proposal is approved, solicit at least 3 bids:

- _____ Information provided by the originator to prospective vendors
- _____ Responses from vendors
- _____ **Rating sheets for each vendor**
- _____ If vendor is considered a "Sole Source" provider, please contact Terry Lefler or Nilsa Rodriguez.

3. Prepare a letter of justification as follows:

- _____ Indicate why a particular vendor was chosen and also why the other vendors were **not** chosen
- _____ Signed & dated by originator
- _____ Signed & dated by appropriate dean/director
- _____ Signed and dated by appropriate VP
- _____ ***Signed and dated by President (for consultants only)**
- _____ Countersigned and dated by Vice President or Associate Vice President of Business Services

4. Compile backup material:

- _____ Account Balance (ACBL) Screen
- _____ **One** of the following is required as backup for the selected vendor. For assistance, call Accounts Payable: 6156 or 6048.
 - _____ **A vendor screen for a selected individual or business vendor already set up in Colleague.**
 - _____ **A W-9 for NEW individuals or business vendors. W9 version MUST be dated January 2011 or later.**

5. Prepare Professional Services Contract - This is our payment instrument and must have original signatures.

- _____ Signed and dated by vendor and signed and dated by originator
- _____ Signed and dated by appropriate budget manager
- _____ Reviewed, signed, and dated by Employee Services **ONLY** for an individual and not an agent or company.
- _____ Signed and dated by appropriate VP
- _____ ***Signed and dated by President (consultants only)**
- _____ Countersigned and dated by Vice President or Associate Vice President of Business Services
- _____ Countersigned & dated by Executive VC of Business Affairs for contracts over \$9,999 – *responsible party: Bus Svcs*

6. District or Vendor-prepared contracts if provided:

- _____ **Contract must state "Dallas County Community College District, a Texas political subdivision of higher education, on behalf of Richland College"**
- _____ Signed and dated by vendor
- _____ Signed and dated by originator
- _____ Signed and dated by appropriate budget manager
- _____ Signed and dated by appropriate VP
- _____ ***Signed and dated by President (consultants only)**
- _____ Countersigned and dated by Vice President of Business Services
- _____ Countersigned & dated by Executive VC of Business Affairs for contracts over \$9,999 – *responsible party: Bus Svcs*
- _____ **REVIEWED, SIGNED, AND DATED BY DCCCD LEGAL COUNSEL (if applicable) – responsible party: Bus Svcs**

7. Invoice from Vendor - Vendor must provide on or AFTER date of service

- _____ Obtaining an invoice is the responsibility of the originator of the contract
- _____ Must include name and address of vendor. This information must match the information on PSC
- _____ Must include date/dates of service
- _____ Fees/charges for service must be itemized and agree with the amounts on PSC
- _____ The DCCCD has a payment policy of "**net 30**" days. This means we have **30** days to pay the vendor from the date we receive their invoice. **It is important that all paperwork be completed in a timely manner in order to process payment within 30 days.**