

## Harris County, Texas

1001 Preston St., 1st Floor Houston, Texas 77002

## Legislation Text

File #: 21-4575, Version: 1
Department: Purchasing
Department Head/Elected Official: DeWight Dopslauf, Purchasing Agent, Purchasing Department
Regular or Supplemental RCA:   Regular RCA
□ Supplemental RCA
Type of Request: Purchase Order
Project ID (if applicable):
Vendor/Entity Legal Name (if applicable):
MWDBE Participation (if applicable):
Request Summary (Agenda Caption): Request for approval of an OMNIA Partners, Public Sector Cooperative Purchasing Program low quote purchase from Letourneau Keller for office furniture for Resources for Children and Adults in the amount of \$55,668.
Background and Discussion:
Expected Impact:
Alta martina Curtismas
Alternative Options:
Alignment with Goal(s):
<ul> <li>☐ Justice and Safety</li> <li>☐ Economic Opportunity</li> </ul>
☐ Housing
☐ Public Health
☐ Transportation

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☐ Flooding ☐ Environment ☐ Governance and Customer Service
Prior Court Action (if any):
Location: Address (if applicable list below):
☐ Countywide ☐ Precinct 1 ☐ Precinct 2 ☐ Precinct 3 ☐ Precinct 4

Fiscal and Persor	nel Summ	ary			
Service Name			FY 21-22	Estimates	
				FY 22	Next 3 FYs
Incremental Expend	litures			•	
Labor Expenditures			-	-	-
Non-Labor Expenditures			-	-	-
Total Incremental Expenditures			-	-	-
Funding Sources (Ge	eneral Fund, F	PIC Fund, Debt or	CP, Grants, or O	ther - Please Spe	cify)
Existing Budget		-	-	-	-
		-	-	-	-
		-	-	-	-
Total Current Budget			-	-	-
Additional Budget Requested		-	-	-	-
		-	-	-	-
		-	-	-	-
Total Additional Budget Requested			-	-	-
Total Funding Sources			-	-	-
Personnel (Fill out se	ction only if r	equesting new PC	CNs)	-	
Current Position Count for Service			-	-	-
Additional Positions Requested			-	-	-
Total Personnel			-	-	-

## **Anticipated Implementation Date:**

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Emergency/Disaster Recovery Note:
$\square$ Not an emergency, disaster recovery, or COVID-19 related item
<ul> <li>□ Emergency Item</li> <li>□ COVID-19 related Item</li> <li>□ Disaster Recovery related Item</li> </ul>
Contact(s) name, title, department:
Attachments (if applicable):