## Resolution # \_\_(\_\_\_\_

WHEREAS, County policies and procedures require both the assigned oversight committee and the County Board to approve all requests to procure goods and/or services costing \$30,000 or more; and,

| WHEREAS, the Department of County Board            | Administration wishes  |
|--|--|
| to procure goods and/or services from Hanson F     | Professional Services Inc.   |
| for the purpose of Grow Our Own Minority Participa | ation Program 2-year contract in the   |
| amount of approximately \$40,000.00;               | and  |
|  |  |
| WHEREAS, this purchase will allow County B         | soard Administration to  |
| provide programs and groups to assist with the Min | ority Participation Program ;  |
| and  |  |
| WHEREAS, as documented by                          | the approval of this resolution,   |
| *  | mittee has approved the  |
| County Board Administration                        | Department's request to procure the  |
| items specified and the committee recom            | * * * *  |
| procurement of the same, and;                      |  |
|  |  |
| NOW, THEREFORE, BE IT RESOLVED th                  | at the Sangamon County Board, in session   |
| this 12th day of March , 2024 , app                |  |
| services detailed above. The Elected Office        |  |
| required documents to execute the provision o      | f this procurement.  |
|  |  |
|  | Chairman, Sangamon County Board  |
|  | Chamman, Sangamon County Board   |
| ATTEST:  |  |
|  |  |
| County Clerk                                       |  |
| Annroyed by the Finance                            | Committee February 27, 24  |
| Approved by the Finance                            | Committee 1477 - Commit |
| RILLU  | Miller   |
| FEB 2 8 2024                                       | , Chairman   |
| LED TO TOTA  | $\mathcal{O}$  |

Attachment: Purchase Order Form County Clerk



## LIVE \*\* Sangamon County \*\* LIVE

## **Purchase Order Edit Listing**

Vendor/Vendor Address P.O. Number Description/Bill to Address Department Type COB.ADMN County \*Standard Grow Our Own Minority Participation 1373-City Of Springfield Board, Administration Program G/L Date: 02/16/2024 City Of Springfield County Administrator **Deliver By Date:** 210 Municipal Center West 200 S Ninth St, Room 201 **Expiration Date:** Springfield, IL 62701 Springfield, IL 62701 Form Type: STND Resolution Number: None Assigned to: None Total Detail: Description Vendor Part Number Quantity U/M Amount/Unit Amount Contractual Srvcs; Other Contractual Service 1.0000 EA 40,000.0000 40,000.00 Contract Number: Confirming: No Ordered For: Ship To: County Administrator List Price Per Unit: 40,000.00 1099 Item: No Ship Via: 200 S Ninth St, Room 201 Discount Percentage: 0% Taxable Item: No Freight Terms: Springfield, IL 62701 Create Asset: No Associate To Asset: Total Purchase Purchase Order Amount: \$40,000.00 Purchase Order Encumbrances: \$40,000.00 Order Items: 1

Total Purchase Orders: 1

Purchase Order Amount: \$40,000.00

Purchase Order Encumbrances: \$40,000.00