

Sole Source Provider Request Form

All sole source procurements exceeding \$250,000.00 must receive prior approval from the DOJ Office of Justice Programs, supporting documentation must be submitted with form (contract and/or invoice).

Project Name: Gaston Coun	ty Family Justice Center
Project Number: 13398	
Implementing Agency: Hope	United Survivor Network
Authorizing Agency: Hope U	nited Survivor Network
Project Director: Stephanie.	Jamoulis
E-mail Address: Stephanie.J	amoulis@gastongov.com
Phone number: 704.689,48	94
Proposed Amount of Invoice,	Contract: \$ 19,500.00
This form is submitted as a for Contractor/Vendor Name: Jean	mal request to use the services of the following contractor as a Sole Source Provider.
Reason for request:	
☐ Service provider is contin	nuing services already engaged from previous year(s)
Advertising & research re in advertising and resear	evealed that there no other service providers in the area (Attach details of the effort made ch)
☑ Other (explain below and	d attach additional documentation)
	is the sole provider of training and technical assistance on the DA-LE instrument ton process. See attached letter from provider for sole source.
Submitted by:	Date: 04/21/2022
	GCC official use only
Approved	Reason for denial:
Denied Date: 05/18/2022	Signature: LaShanya Richardson
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