

OFFICE OF THE STATE COMPTROLLER

CONTRACT COMPLIANCE FORM E2

POST-AWARD NOTIFICATION FOR CONTRACTS UNDER EXECUTIVE ORDER 166 FOR CONTRACTS VALUED AT \$150,000 OR MORE INVOLVING COVID-19 RECOVERY FUNDS Submit to contracts@osc.ni.gov no later than 20 business days after contract award

Date of Contract Award:	Awarded Amount:	OSC File #:	Today's Date:
State Department or Authority:			
Contract Title and Description:			
Project #, Bid, RFP, or Waiver #:			
Name of Vendor(s) or Contractor (s):			
Source(s) of Federal Funding: Specify Source (e.g. CORONAVIRUS RELIEF ACT (CRF), FEMA, CARES ACT, Consolidated Act, or any other COVID-19 funding source):			
Contract Type: Professional Services Construction	□ Services (other than I □ Other:	Professional Services)	Goods
Contract Term (describe in m	nonths or years):		
New Contract IRenewal/Extension Amendment/Supplement			
Contract Execution Date:Contract End Date:			
Procurement Method: Waiver (Exempt from Advertisement) State Contract Purchase Invitation to Bid (low bid) Request for Proposals Delegated Purchasing Authority (DOH, OEM, DHS, & DCF only) Request for Qualifications			
Statutory Authority:			
□ State Procurement Law (N.J.S.A. 52:34-6 et seq./N.J.S.A. 52:32-2) □ Executive Order 37 □ Other (Cite statute, administrative code, or internal procurement policy):			
SUBMISSION INCLUDES (check all that apply):			
EXCEPTIONS FROM BIDDING DPP WAIVER or DPA: Complete Waiver Packet Justification for waiver Approvals: CCAU Approval OMB Ap OIT Approval Purchase Order Vendor Quotes or Proposa FULLY EXECUTED CONTRA	oproval □ DAG Approval Treasury Approval Is	STATE AUTHORITIES/II COLLEGE, or UNIVERS Purchase Order Vendor Quotes or Prop Any required approval FULLY EXECUTED COI Terms & Conditions Federal Rider Resolution authorizing	ITY posals s NTRACT
STATE CONTRACT PURCHASE		COOPERATIVE PURCHASE	
State Contract #: □ Purchase Order □ Vendor Quote (if required)		Issuing Agency: □ Purchase Order □ Participating Addendum	
	Quote (il required)		
 The bid/proposal of succes Bid tabulation FULLY EXECUTED CONTRAC Contact information (individue Name:	ACT	☐ All documents ☐ Any required p sion to OSC):	tings or rankings ion of Award □ Evaluation Report associated with a bid protest ublished notices (legal ads)
Phone Number:			
Accountability Officer Name:		Email:	

Pursuant to N.J.S.A. 52:15C-14 and E.O. 166 (Murphy), all government units shall provide full assistance and cooperation to the New Jersey Office of the State Comptroller (OSC) with any contract review and shall provide additional documents when requested.