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STATE PROCUREMENT OFFICE OF HAWAII

STATE PROCUREMENT OFFICE NOTICE & REQUEST FOR SOLE SOURCE

- 1. TO: Chief Procurement Officer *mf go ms*
- 2. FROM: Health / Disease Outbreak Control / Immunization Branch
Department/Division/Agency

Pursuant to HRS §103D-306 and HAR Chapter 3-122, Subchapter 9, the Department requests sole source approval to purchase the following:

3. Description of goods, services, or construction:
 Aloha United Way (AUW) provides a comprehensive statewide community information and referral service at no cost to the public. AUW provides information about where the public can obtain seasonal influenza, information on adult immunization providers and resources that provide Hepatitis A, Hepatitis B, Human Papillomavirus, Meningococcal, MMR, Pneumococcal, Tdap/Td, Varicella and Zoster vaccines, and information on childhood immunization providers and resources.

4. Vendor Name: Aloha United Way Address: 200 North Vineyard Blvd., Suite 700 Honolulu, HI 96817	5. Price: \$12,000.00
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6. Term of Contract: (mm/dd/yyyy) From: <u>August 1, 2011</u> To: <u>July 31, 2012</u>	7. Prior Sole Source Ref No. _____
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8. Feature: The good, service, or construction has the following unique features, characteristics, or capabilities:
 This service is the only statewide service of this type currently available in Hawaii.

9. Essential features. How the unique features, characteristics, or capabilities are essential for the agency to accomplish its work:
 Aloha United Way's 211 phone line is the only toll free statewide community information and referral service. 211 provides the public with means of obtaining health and human services information for 4,000 community resources through an easy to remember universal phone number for non-emergency help. This is part of our state's social service "safety net".

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REQUEST FOR SOLE SOURCE (Cont.)

11. Alternate source. The following other possible sources for the good, service, or construction were investigated but do not meet our needs because: There is no other vendor that currently provides this type of service on a statewide basis.

12. Direct any inquiries to:
Department: Health / DOCD
Contact Name/Title: Tammie Wong / Acting Fiscal Specialist

13 Phone Number:
587-6599
Fax Number:
587-6886

Expenditure may be processed with a purchase order/pCard: Yes No
If no, a contract must be executed and funds certified.

Agency shall ensure adherence to applicable administrative and statutory requirements, including HAR Chapter 3-122, Subchapter 15, Cost or Pricing Data, if required.

14. I certify that the information provided above is to the best of my knowledge, true, correct and that the goods, services, or construction are available through only one source.

Department Head Signature

7/1/11
Date

Reserved for CPO Use Only

15 Date Notice Posted: 7/5/2011

Submit written objections to this notice to issue a sole source contract within seven calendar days or as otherwise allowed from the above posted date to:
Chief Procurement Officer
State Procurement Office
P.O. Box 119
Honolulu, Hawaii 96810-0119

16. Chief Procurement Officer's comments:

This request is returned with no action required. Department should follow small purchase procedures pursuant to Procurement Circular No. 2009-15.

17. APPROVED DISAPPROVED NO ACTION REQUIRED

Adams. Jaji
Chief Procurement Officer

7/21/2011
Date