CONTRACT COVER SHEET

Instructions:

Date:

- All contracts submitted to General Counsel must have the Contract Cover Sheet
- Email the completed cover sheet along with all contractual documents (with attachments, exhibits) and send to GC's office
- Do NOT include any contract notes, Attorney-client privileged communications (such as emails) or trade secret documents

Today's date

- Once approved, GC's office will return all to requestor/VP for signature
- Once fully executed, requesting department returns entire SCANNED package (cover sheet, contractual documents with attachments, exhibits) to contractscan@wichita.edu

Requesting Department:	1	
		Division/College/Department
Requesting ORG Code:		Banner Department #
Fund Code:		Banner Fund for purchase
Vendor Name:		Vendor name from contract
Contract Signed by:		VP or Authorized Signer Name
Total Contract Amount:		Lifetime Cost
Contract Effective Date:		Complete after contract signed
Internal Dept Tracking #:		Department Use to Track Contracts Internally
BRIEFLY STATE THE PURPOSE OF THIS CONTRACT		
TOTAL COST (list the one-	time and annual recurring cost of the	e contract)
TOTAL COST (list the one-	time and annual recurring cost of the	e contract) OTHER:
	ANNUAL:	<u> </u>
• ONE-TIME:	ANNUAL: RACT - BEGIN DATE:	OTHER:
ONE-TIME: IF MULTI-YEAR CONTE ADDITIONAL INFORMATION	ANNUAL: RACT - BEGIN DATE: ON: d with any other contracts or agre	OTHER:
ONE-TIME: IF MULTI-YEAR CONTE ADDITIONAL INFORMATION Is this contract associated vendor for original contract.	ANNUAL: RACT - BEGIN DATE: ON: d with any other contracts or agrect. Yes No	OTHER: END DATE or ongoing:
ONE-TIME: IF MULTI-YEAR CONTE ADDITIONAL INFORMATION Is this contract associated vendor for original contract Original Contract Date:	ANNUAL: RACT - BEGIN DATE: ON: d with any other contracts or agrect. Yes No	OTHER: END DATE or ongoing:
ONE-TIME: IF MULTI-YEAR CONTE ADDITIONAL INFORMATION Is this contract associated vendor for original contract original contract Date: Approved as to Form	ANNUAL: RACT - BEGIN DATE: ON: d with any other contracts or agrect. Yes No	OTHER: END DATE or ongoing: ements currently in effect with WSU? If YES, provide date,
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^{**}PLEASE NOTE – Information contained on this document may be subject to Kansas Open Records Act.