

July 13, 2023

Sharon Young (Manager, Project Management Services)
Government of Yukon
Health and Social Services | Corporate Services | Information Services

Hi Sharon,

Please find the following quote for a Project Manager Consultant resource.



HEALTH AND SOCIAL SERVICES
PROCUREMENT REQUEST

Please send completed form to your divisional finance team for review and approval before sending into HSS Corporate Procurement Services.

All fields are mandatory. Failure to fill in fields may result in delays.

Date 2023 / 7 / 13	Procurement service/goods required by Start date: 2023 / 7 / 19	Procurement service/goods required until End date: 2023 / 9 / 30
Requisitioned by		
First and last name Abby Kosmenko	Email address abby.kosmenko@yukon.ca	Phone number 667-9476
Specifications contact / contract manager		
First and last name Sharon Young	Email address sharon.young@yukon.ca	Phone number 334-6459
Financial contact		
First and last name Abby Kosmenko	Email address abby.kosmenko@yukon.ca	Phone number 667-9476
Shipping address		
Street #1 Hospital Road	City Whitehorse	Postal code Internal mail code H1
Billing address		
Street	City	Postal code Internal mail code
Division Corporate Services	Program area Project Management Services	

Please ensure S.24 signee has signing authority before sending to Corporate Services (T:Drive)

Section 24 authority : certified pursuant to section 24 (commitment authority) of the <i>Financial Administration Act</i>		
Print name Adam Labar	Position title Director	Signature 

Full coding - failure to provide complete coding may result in delays											
Fiscal	Vote	Program	Object	Ledger 1	Ledger 2	Amount					
s.77(1)(a), s.77(1)(b), s.77(1)(c)											
/											
/											
/											

Is this a change order? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Existing contract number	New completion date? YY / MM / DD
Increased amount?	Decreased amount?	New total value?
Is this an IT hardware or software purchase?		<input type="checkbox"/> Hardware <input type="checkbox"/> Software
Has HSS IT been consulted? If yes, please provide approval documentation		<input type="checkbox"/> Yes <input type="checkbox"/> No

Please provide as much detail as possible and include a specifications sheet, quote, proposal, or estimate
 Description must include measurements, colour, model number, etc.; or provide a quote.
 Please provide additional information/pages, as necessary.

Quantity	Description/specification	Recommended supplier	Estimated cost each	Extended cost
s.77(1)(a), s.77(1)(b), s.77(1)(c)				

Please complete this section. Please provide additional information/pages, as necessary.
 Description must include scope (i.e. what, when, where, how), outcomes, rates of pay, total value; or provide a quote.

Quoted supplier	Are they an active vendor in FE?	Vendor ID
s.77(1)(a), s.77(1)(b), s.77(1)(c)		

Supplier contact information

Vendor contact name	Phone number	Vendor ID
s.77(1)(a), s.77(1)(b), s.77(1)(c)		

Email	Website or link
s.77(1)(a), s.77(1)(b), s.77(1)(c)	

Description of service/goods
s.77(1)(a), s.77(1)(b), s.77(1)(c)