

Independent Activity Funds (IAF) Request for Purchase

Division of Financial Management
15 West Gude Drive, Suite 200, Rockville, Maryland
MONTGOMERY COUNTY PUBLIC SCHOOLS

GENERAL INSTRUCTIONS

Use this form to authorize purchases of goods or services, to request reimbursement for approved purchases of goods, and to confirm fund availability. Do not use this form to process payments to MCPS employees, except for reimbursements. To be paid, the original detailed billing documentation, such as an invoice or register tape (for school purchases ONLY) must be attached to this request. If reimbursement will be requested from MCPS, a copy of that billing documentation must be attached to this request. See the accompanying instructions page with this form for additional details for the processing of this form.

PART A—TO BE COMPLETED BY THE REQUESTOR

Requestor Name: _____ Requestor Position: _____ Request Date: ____/____/____

School Name: _____ School Number: _____

This request is for (choose one): Goods (items) Reimbursement Independent Contractor/Consultant Services*

**If you choose Independent Contractor/Consultant Services, you must also complete section A.1 below, and submit the vendor verification package to the Department of Procurement. See details in section A.1 below.*

Vendor/Payable To: _____ Account to be Charged: _____

Amount of Request: _____ Available Account Balance: _____

Reason for Purchase and/or Description of Services:

Is this request for a high-risk purchase, such as playgrounds, inflatables, climbing walls or rides? Yes No

If yes, information about the purchase must be emailed to the following **at least 1 month prior to ordering**:
riskmanagement@mcpsmd.org and peter_park@mcpsmd.org.

PART A.1— REQUIRED TO BE COMPLETED BY REQUESTOR IF INDEPENDENT CONTRACTOR/CONSULTANT SERVICES WAS SELECTED ABOVE

Will the independent contractor/consultant have direct, unsupervised, or uncontrolled access to students? Yes No

What is the period for services to be provided? ____/____/____ - ____/____/____

Vendor Address: _____

Vendor Email: _____ Vendor Phone: ____-____-____

Vendor Verification Package: Prior to the start of services, you must submit the Vendor Verification Package to the Department of Procurement for approval. The package includes both pages of this form, a current copy of the vendor W-9, and a completed [MCPS Form 235-40, Response Form for Required Criminal Background Checks](#). Submit the package at least 15 days prior to the anticipated start of services to procurement@mcpsmd.org.

PART A.2—REQUIRED SIGNATURES FOR ALL REQUESTS

Requestor Signature: _____ Date: ____/____/____

Financial Agent Name: _____ Financial Agent Signature: _____ Date: ____/____/____

Principal Name: _____ Principal Signature: _____ Date: ____/____/____

PART B—TO BE COMPLETED BY THE FINANCIAL AGENT

For Payment via Check

Check Date: ____/____/____ Check Number: _____ Check Amount: _____

Original Detailed Billing Documentation Sent to MCPS: ____/____/____ Reimbursement Received from MCPS: ____/____/____

For Payment via Hub+

Requisition Number: _____ Purchase Order Number: _____ iPayment Invoice Number: _____

PART C—VENDOR VERIFICATION AND CLEARANCE TO WORK

Required for Requests for Independent Contractor/Consultant Services

If Independent Contractor/Consultant Services was selected in Part A on Page 1 of this form, the following must be submitted to the Department of Procurement (procurement@mcpsmd.org) to complete the vendor verification process to clear the vendor to provide services:

- Both pages of this form, with Part A completed and all signatures obtained. Part B does not have to be completed.
- A current W-9 from the vendor.
- Completed [MCPS Form 235-40, Response Form for Required Criminal Background Checks](#)

Submit this package of documents **at least 15 days prior to the anticipated start of services**. Signature on this form by the Department of Procurement is required to authorize the independent contractor/consultant to begin work.

PART C.1—REQUEST INFORMATION (DUPLICATES FROM PAGE 1 IF COMPLETED ELECTRONICALLY)

Requestor Name: _____ Requestor Position: _____ Request Date: ____/____/____

School Name: _____ School Number: _____

Vendor/Payable To: _____ Amount of Request: _____

Will the independent contractor/consultant have direct, unsupervised, or uncontrolled access to students? Yes No

PART C.2—VENDOR VERIFICATION AND CLEARANCE BY DEPARTMENT OF PROCUREMENT ONLY

Current W-9 Received/On File: Yes No Vendor Approved in Hub+ Yes No

Vendor Response Received for MCPS Form 235-40: Yes No Criminal Background Check Required: Yes No

Consultant/Independent Contractor Cleared to Begin Work: Yes No Supplier Number: _____

Comments:

Name: _____ Title: _____

Signature: _____ Date: ____/____/____

ADDITIONAL INSTRUCTIONS AND GUIDANCE

PURPOSE OF THIS FORM—Page 1 of this form is required for school based-staff to obtain authorization for purchases of goods or services, or to request reimbursement for approved purchases of goods. See below for additional requirements for requests for independent contractor/consultant services. For high-risk purchases and requests for independent contractor/consultant services, requests must be made in advance—see timeline requirements below.

REQUESTS FOR INDEPENDENT CONTRACTOR/CONSULTANT SERVICES—For requests of services to be provided by an independent contractor/consultant, Requestors must submit this form (Part A completed), along with a current W9 and [MCPS Form 235-40, Response Form for Required Criminal Background Checks](#) as a package to the Department of Procurement. Services may not be provided until the approval signature from the Department of Procurement is obtained in Part C. Requests should be submitted at least 15 days prior to the anticipated start of services.

- **VENDOR INVOICING**—Independent Contractors/Consultants should send invoices directly to the school, and should not send them to the Department of Controller. The requestor/sponsor must verify invoice accuracy, and sign/date the invoice. If paid via MCPS purchase order, the purchase order number must be written on the invoice, receiving completed in Hub+, and then the invoice should be submitted to accountspayable@mcpsmd.org for payment to be processed.

PAYMENTS TO MCPS STAFF—This form may not be used to request payments to MCPS employees, except for reimbursements for approved purchases of goods. **Current, former, or temporary MCPS employees may not be paid as vendors or hired as independent contractors/consultants.** Any IAF payments for services performed by MCPS employees must be processed through the MCPS payroll system using [MCPS Form 280-46, IAF Request for Payment to MCPS Employees for Services \(Work\) Performed](#).

HIGH RISK PURCHASES—Requests for purchases for high-risk items must receive prior authorization by Risk Management and Systemwide Safety Programs. Requests should be made at least one month in advance. Such procurement include, but are not limited to, purchases for playgrounds, inflatables/moon bounces, and climbing walls. See the MCPS Financial Manual, Chapter 20, *Independent Activity Funds*, for additional information.

RESTRICTED PURCHASES—[MCPS Form 281-54, Restricted IAF Purchases](#), must also be completed and approved by the Chief Financial Officer if the request is for a restricted purchase. There are exceptions to completing this form for what would otherwise be a restricted purchase—see Chapter 20, *Independent Activity Funds*, of the financial manual for details. Restricted purchases include:

- Boxlight/Flat Panel Purchase
- Construction/Facility Modification
- Contract with time period greater than 3 years
- Furniture Purchase of \$1,500 or more
- Procurement requiring disbursement of \$7,500 or more
 - » Purchases of \$7,500-\$24,999 also require completion of [MCPS Form 234-24, Competitive Price Quote Form](#).
 - » Purchases of \$25,000 or more require Board approval.
- Staff Appreciation/Refreshment Waiver

PROCUREMENT REQUIREMENTS—All purchases must adhere to MCPS procurement processes and requirements based on spending thresholds. Purchases of \$1,500 or more must be processed by submitting a requisition in Hub+ after all required approvals are obtained, unless the purchase is for an authorized exception.

- Chapter 15, *Independent Contractors/Consultants*—Exceptions and procurement requirements pertaining to services to be provided by Independent Contractors/Consultants
- Chapter 3, *Procurement*—General procurement guidance

POLICIES, REGULATIONS, AND MANUALS FOR REFERENCE—

- [DJA-RA, Procurement of Equipment, Supplies, and Services](#)
- [DJA-RB, Purchases of Materials and Equipment Using Nonappropriated Funds and Acceptance of Donated Items](#)
- [GCA-RA, Employee Conflict of Interest](#)
- [MCPS Financial Manual](#)

DOCUMENT RETENTION—Copies of this form are to be retained and properly filed by the Financial Agent for access as required for audit. Copies of the documentation can be made for the requestor as needed.