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|  | OHIO DEPARTMENT OF PUBLIC SAFETYOHIO TRAFFIC SAFETY OFFICE**REQUEST TO PURCHASE** |  |
|  |
| NAME OF YOUR AGENCY      | GRANT #      |
| **SUPPLIES** |
| [ ]  N/A - not requesting to purchase supplies. |
| ITEM(S) AND NUMBER TO BE PURCHASED      |
| Is item(s) in budget? [ ]  YES [ ]  NO | TOTAL COST**$**       |
| **PRINTED MATERIALS** |
| [ ]  N/A - not requesting to purchase printed materials. |
| DESCRIPTION OF PRINTED MATERIALS      |
| WHERE WILL MATERIALS BE DISTRIBUTED?      |
| Is item(s) in budget? [ ]  YES [ ]  NO | TOTAL COST**$**       |
| [ ]  I have attached a draft of printed materials prior to their production. |
| **Note:** All public service announcements funded with federal funds, in whole or in part, must be close captioned for the hearing impaired. All printed materials shall include the credit line: “Funded by U.S. DOT / NHTSA and ODPS.” |
| **CONTRACTUAL** |
| [ ]  N/A - not requesting to contract for booth, vendor, or other. |
| DESCRIPTION OF CONTRACTUAL ITEM      |
| Is item(s) in budget? [ ]  YES [ ]  NO | TOTAL COST**$**       |
|  |
| NAME       | E-MAIL ADDRESS      | DATE SUBMITTED      |
| **E-MAIL COMPLETED FORM TO YOUR ASSIGNED PLANNER** |
| **OTSO USE ONLY** |
| RPM REVIEWED      | DATE REVIEWED      | MANAGEMENT REVIEWED      | DATE REVIEWED      |
| APPROVED       DISAPPROVED       MODIFICATIONS REQUIRED        |
| NEEDED MODIFICATIONS      |
| IF DISAPPROVED, STATE REASON      |