

OSC APPROVAL PROCESS

**(FOR EQUIPMENT
PURCHASE ORDERS
OVER \$250k)**

CREATE AN "OP" NUMBER IN SUNY (FOR PO'S OVER \$250K THAT NEED OSC APPROVAL)

ADDING AN "OP" CONTRACT TO SUNY

1. Click Finance – SUNY Contract
2. Input "OP" and the last 5 numbers of the Lawson PO# under Contract Number
 - a. Enter Contract Amount – Input Start Date as about 3 week from the day the OP number is entered – Input End Date as a year from the Start Date
 - b. Input Contract Description and any Contract Provisions, if applicable

Contract Version Header

* Contract Number: * Contract Amount:

* Start Date: * End Date:

* Contract Description:

* Contract Provisions:

(SAVE)

3. Vendor Tab
 - a. Search by SFS ID – Pick Vendor that has ACH

Vendor Search Results								
(1 of 1)								
Detail	SFS Vendor Name	Vendor EIN	Certification(s)					
	GE PRECISION HEALTHCARE LLC	830849145						
Addresses								
SFS Vendor Identifier	SFS Sequence	SFS Location	SFS Location Description	Vendor Address	City	State	Zip Code	ACH
1100224302	001	LOC01	Initial Setup	PO BOX 96483	CHICAGO	IL	60693	
1100224302	001			PO BOX 96483	CHICAGO	IL	60693	
1100224302	002	LOC01	Initial Setup	3000 N. GRANDVIEW BLVD	WAUKESHA	WI	53188	
1100224302	002			3000 N. GRANDVIEW BLVD	WAUKESHA	WI	53188	
(1 of 1)								

(SAVE)

4. Parcel/Funding Tab

a. UNSPC Code – Summary – Use UNSPC Code from Lawson, copy code and Search – Select

Saved Vendor Successfully

UNSPSC Search

UNSPSC Code or UNSPSC Description: 43211515
 Sub-Object Code:

Search

UNSPSC Search Results

(1 of 1) 10

Unspsc Title	Unspsc Code
Computer workstation	43211515

(1 of 1) 10

Select

Parcel Information

UNSPSC: 43211515 - Computer workstation
 Commodity Code: 75008-00
 * Parcel Description: Computer workstation

Parcel Funding Lines

+ Add Funding

b. Fill in details

c. Add Funding – Fill in Account Info – Sub Object – Fiscal Year – Amount – Save & Return

d. If it's an SUCF funded order, make sure to confirm the account number and year with the end user or check the end user comments in Lawson.

(SAVE) – To add line

Account Funding

Funding Line

* Account Number: 0540230000 - 321056 Rehabilitate Heart Center EP Lab
 * Sub Object Code: 531260 - COMPUTER ACCESSORIES
 * Fiscal Year: 2018 * Amount: \$303,394.06

+ Save / Add Next Account | Save & Return

Parcel Funding Lines

(1 of 1) 10

Account Number	Sub Object	Fiscal Year	Encumbrance Total	Balance
0540230000	575700	2018	\$303,394.06	\$303,394.06

(1 of 1) 10

+ Add Funding

Save | + Add Parcel

5. NYS/Campus – Fill in the information as shown below. If using an SUCF account, the Federal Product Code is always Construction. PSP Method is always “Source PO Date + 3- Days” as that’s the standard in Lawson for Purchase Orders. Batch Type Code will always be “EBP” since we do IFB’s. Contractor Type is always “X – All Other Business Entities” unless it’s MWBE/SDVOB.
(SAVE)

Contract NYS/Campus Information

Saved Parcels Successfully

* Federal Product Code: C -- Construction

* Commodity Code: 75008 - 00 - Office automation systems/ peripherals (ibm)

* PSP Method: Source PO Date + 30 Days

* Discretionary Indicator: G - GPO

* Omnibus Indicator: Blank -- < \$100,000

* Batch Type Code: EBP -- Electronic - Lowest Price (IFB)

* Contractor Type: X - All Other Business Enterprises

* Recycled Indicator:

* Preparer's Name: Richard Frenger

* Phone Number: (631) 444-0648 * Phone Type: WK - Work Phone

* Initiated By: ROF

* Buyer's Initials: ROF

Two:

Four:

Six:

Eight:

Fifteen:

Save

6. The History Tab will be shown, as seen below. Check through each section to make sure all information is correct.

Header | Vendor | Parcel/Funding | NYS/Campus | **History**

Saved NYS/Campus Successfully

SUNY Contract Information

Document Number	OP05134
Total Amendment Count	1
Date Created:	09/29/2020
Total Contract Amount	\$303,394.06
Total Paid Amount:	\$0.00
Total Encumbered Amount:	\$303,394.06
Last Modified By:	TLEPPLA

▶ SUNY Contract Version Information
 ▶ SUNY Contract Vendor Information
 ▶ SUNY Contract Parcel Information
 ▶ SFS Transmit & Reconcile

7. Wait 24 hours for the "OP" contract number to populate in the EDSS system.
8. Code and put all comments in Lawson that are needed for the project. Release from Lawson so SUNY PO can be issued (DO NOT SEND TO VENDOR UNTIL OGS APPROVAL IS RECEIVED).

EDSS UPLOAD OF CONTRACT DOCUMENTS FOR APPROVAL

1. Click Electronic Documents Submission System
2. Under "Contract Documents" click Submit Procurement Contract/Amendment



Grant Procurement Record

- Submit New Procurement Record
- Submit Procurement Record Amendment
- Submit Limited Funding Request



Exemption Request

- Submit Contract Reporter
- Exemption Request (CRER)



Contract Documents

- Submit Procurement Contract / Amendment
- Submit Revenue Contract / Amendment

- a. Input the OP number in the Audit ID section and click Search

Find Procurement Contracts

Audit ID
OP00154

PeopleSoft ID
.

Procurement Type	NY Award ID	SFS PeopleSoft ID	Seq #	Supplier ID	Supplier Name
Non-Materiality Contract	12-2023-12-13				

Cancel

- b. Select the correct Procurement Contract/Amendment.

Find Procurement Contracts

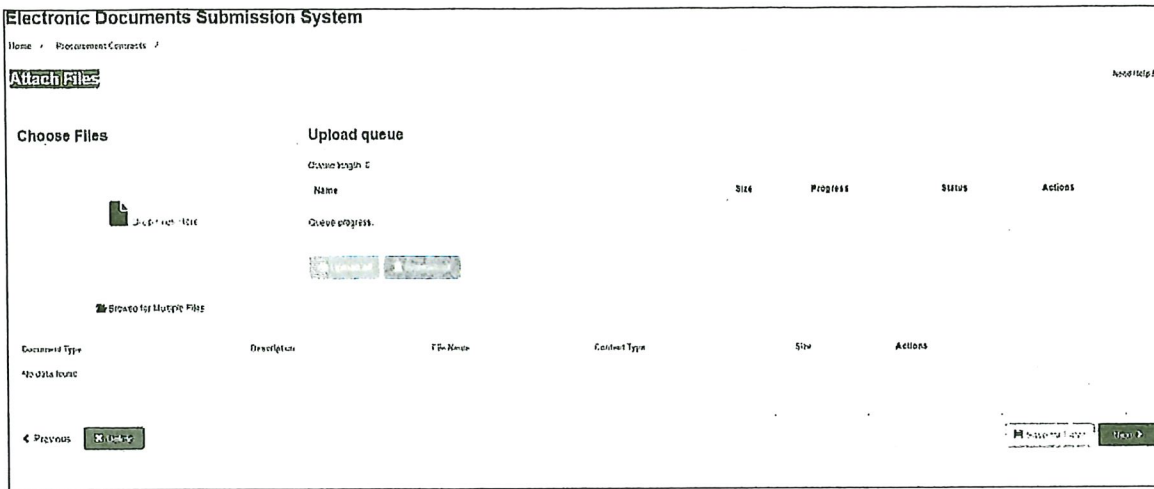
Audit ID
OP00124

PeopleSoft ID
.

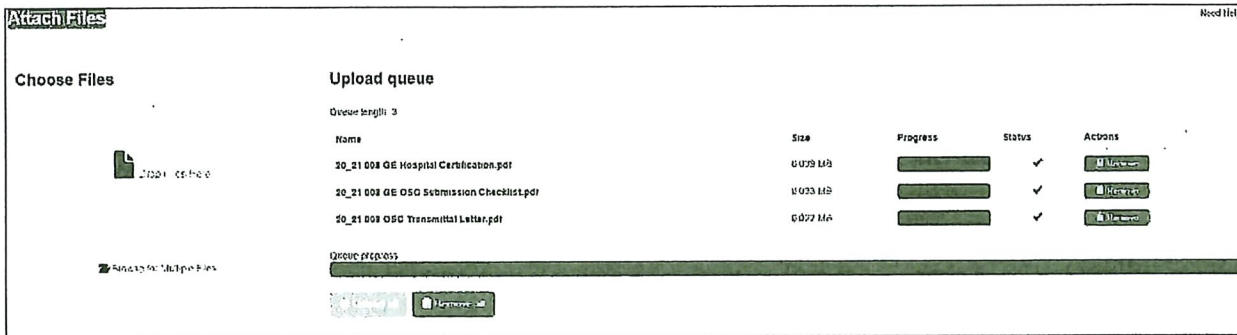
Procurement Type	NY Award ID	SFS PeopleSoft ID	Seq #	Supplier ID	Supplier Name
Contract	12-1-2023-12-13-2023-12-13	02000000000000000000000000000000	001	100224367	11 F OI CENTER HEALTH-CARE LLC

Cancel

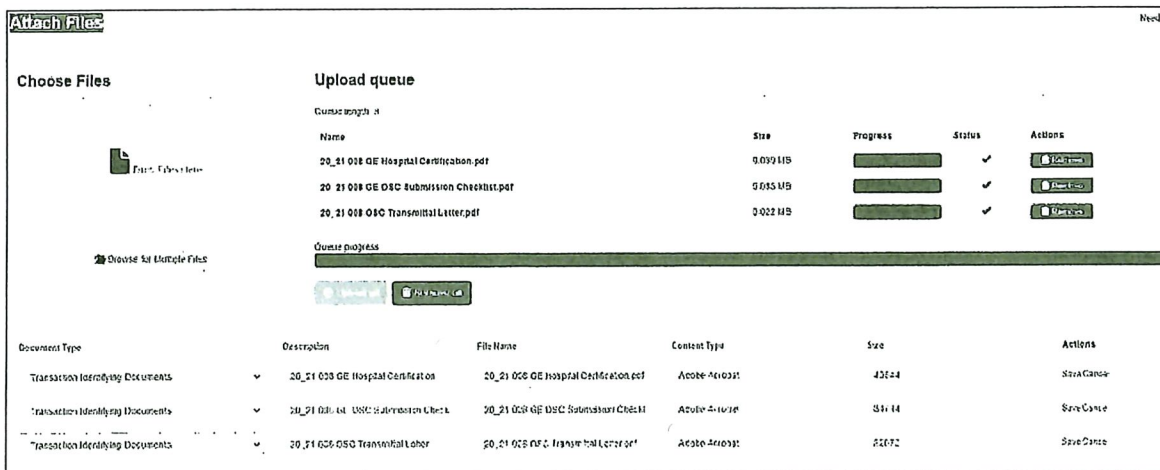
3. **Attach Files** for OSC to Review. You can select to upload individual or multiple files.



4. **Attach Files.** The files will show in the Upload queue. Select Upload all to upload your documents.



5. Once files are uploaded you will need to select a Document Type from the drop down box. The Description field automatically populates with the File Name, but can be changed if needed.



6. Select **Save** after you have labeled and named each file.

Document Type	Description	File Name	Contract Type	Size	Actions
Contract	20_21 000 GE ERF 01 Certification	20_21 000 GE ERF 01 Certification	Adobe Acrobat	65 KB	Download
Contract	20_21 000 GE ERF 01 Submission Results	20_21 000 GE ERF 01 Submission Results	Adobe Acrobat	52 KB	Download
Contract	20_21 000 GE ERF 01 Attachment	20_21 000 GE ERF 01 Attachment	Adobe Acrobat	22 KB	Download
Contract	20_21 000 GE ERF Response Request	20_21 000 GE ERF Response Request	Adobe Acrobat	60 KB	Download
Contract	20_21 000 GE ERF 01 A	20_21 000 GE ERF 01 A	Adobe Acrobat	186 KB	Download
Contract	20_21 000 GE ERF 01 A-1	20_21 000 GE ERF 01 A-1	Adobe Acrobat	148 KB	Download
Contract	20_21 000 GE ERF 01 A-C1	20_21 000 GE ERF 01 A-C1	Adobe Acrobat	65 KB	Download
Contract	20_21 000 GE ERF 01 B	20_21 000 GE ERF 01 B	Adobe Acrobat	251 KB	Download
Contract	20_21 000 GE ERF 01 F	20_21 000 GE ERF 01 F	Adobe Acrobat	200 KB	Download
Contract	20_21 000 GE ERF 01 G	20_21 000 GE ERF 01 G	Adobe Acrobat	47 KB	Download
Contract	20_21 000 GE ERF 01 H	20_21 000 GE ERF 01 H	Adobe Acrobat	112 KB	Download
Contract	20_21 000 GE ERF 01 I	20_21 000 GE ERF 01 I	Adobe Acrobat	26 KB	Download

7. After you have uploaded, labeled and named all your files, select **Next**.

8. **Choose Additional Contacts. (Optional)** Select other people, from your list of stored agency contacts, to receive system notifications. Multiple people can be selected using **Ctrl + Click**. Select **Next** once you have the correct people selected.

Choose Additional Contacts Need Help?

Additional Contacts:

- James Smith
- John Doe
- Margaret White

[Previous](#) [Next](#)

9. **Review Procurement Submission.** The transaction details from SFS are displayed, along with all the documents you uploaded and any additional contacts you added.

Contract Information

<p>Business Unit 02401 State University of New York</p> <p>Department 1330210 - State University of New York</p> <p>Audit ID 02401020101330210</p> <p>Sequence Number 001</p> <p>Primary Contact Richard Florio - richard.florio@sunysb.edu</p> <p>Supplier ID *10028402</p> <p>Start Date 10/15/2020</p> <p>Procurement Type Procurement Contract</p>	<p>SFS Contract ID 0020000202000000173425</p> <p>Version Number 1</p> <p>NYS Contract Number OF05134</p> <p>Transaction Amount \$300,000.00</p> <p>Status Draft</p> <p>Supplier Name GE PROVISIONAL CONTRACT LLC</p> <p>End Date 10/15/2021</p> <p>Final Document Download Documents Available</p>
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Attachments

Document Type	Description	File Name	Type	Size
Transaction Identifying Documents	20_21_003 OSC Transmittal Letter	20_21_003 OSC Transmittal Letter.pdf	Adobe Acrobat	22,04 KB
Vendor Responsibility and Integrity	20_21_003 OC C105_2	20_21_003 OC C105_2.pdf	Adobe Acrobat	28,39 KB
Transaction Identifying Documents	20_21_003 OC Hospital Certification	20_21_003 OC Hospital Certification.pdf	Adobe Acrobat	30,69 KB
Contract	20_21_003 Public Officers Law Form	20_21_003 Public Officers Law Form.pdf	Adobe Acrobat	20,55 KB
Contract	20_21_003 GE Exhibit A	20_21_003 GE Exhibit A.pdf	Adobe Acrobat	112,41 KB
Contract	20_21_003 GE Exhibit B	20_21_003 GE Exhibit B.pdf	Adobe Acrobat	437,19 KB
Contract	20_21_003 GE Exhibit C	20_21_003 GE Exhibit C.pdf	Adobe Acrobat	209,67 KB
Contract	20_21_003 GE Exhibit D	20_21_003 GE Exhibit D.pdf	Adobe Acrobat	101,40 KB
Contract	20_21_003 GE Exhibit E	20_21_003 GE Exhibit E.pdf	Adobe Acrobat	603,19 KB
Contract	20_21_003 GE Exhibit F	20_21_003 GE Exhibit F.pdf	Adobe Acrobat	149,89 KB
Contract	20_21_003 GE Exhibit G	20_21_003 GE Exhibit G.pdf	Adobe Acrobat	156,57 KB
Contract	20_21_003 GE Bid Response Agrees	20_21_003 GE Bid Response Agrees.pdf	Adobe Acrobat	62,91 KB
Contract	20_21_003 OSC Transmittal Letter	20_21_003 OSC Transmittal Letter.pdf	Adobe Acrobat	22,04 KB
Contract	20_21_003 GE OSC Submission Checklist	20_21_003 GE OSC Submission Checklist.pdf	Adobe Acrobat	15,87 KB
Contract	20_21_003 OC Hospital Certification	20_21_003 OC Hospital Certification.pdf	Adobe Acrobat	30,69 KB
Procurement Documents	20_21_003 OC Vendor Award Letter	20_21_003 OC Vendor Award Letter.pdf	Adobe Acrobat	20,59 KB
Procurement Documents	20_21_003 GE ST2201P	20_21_003 GE ST2201P.pdf	Adobe Acrobat	441,60 KB
Procurement Documents	20_21_003 GE ST2202A	20_21_003 GE ST2202A.pdf	Adobe Acrobat	227,51 KB

10. **Review Procurement Submission.** At the bottom of the page is a certification. You have to check the certification before the transaction can be submitted to OSC. Once you have reviewed everything and are ready, select **Submit** to send the transaction to OSC.

Additional Contacts

Classification

This transaction is:

Certification

I certify that the electronic record being submitted is the complete contractual agreement and procurement record. This electronic record was made in the regular course of business using a process that accurately reproduces the original and does not permit additions, deletions, or changes without leaving a record of such additions, deletions or changes.

Check here to indicate that you have read the certification and agree to certify this submission.

← Previous

Submit 43

Additional Contacts

Classification

This transaction is:

Select the price to bid at the bottom of the OSC Submission Checklist in the vendor's bid response.

Certification

I certify that the electronic record being submitted is the complete contractual agreement and procurement record. This electronic record was made in the regular course of business using a process that accurately reproduces the original and does not permit additions, deletions, or changes without leaving a record of such additions, deletions or changes.

Check here to indicate that you have read the certification and agree to certify this submission.

← Previous

Submit 62

CHECKLIST FOR DOCUMENTS THAT NEED TO BE UPLOADED TO EDSS

<u>Document</u>	<u>Category</u>	<u>Bucket</u>
Hospital Contract Certification	Transaction Identifying Documents	1
OSC Checklist	Transaction Identifying Documents	1
OSC Transmittal Cover Letter	Transaction Identifying Documents	1
Vendor signed Bid Response	Contract	2
Exhibit A	Contract	2
Exhibit A-1	Contract	2
Exhibit E	Contract	2
Exhibit F	Contract	2
Exhibit L	Contract	2
Exhibit N	Contract	2
Exhibit C & C-1	Contract	2
Public Officers Law Form	Contract	2
NYSR Advertisement	Procurement Documents	3
Procurement Checklist	Procurement Documents	3
Vendor Award Letter	Procurement Documents	3
Bid Affidavit / Bid Tab	Procurement Documents	3
End User Justification	Procurement Documents	3
Finance Law 139-I	Procurement Documents	3
MD Buyline Analysis	Procurement Documents	3
Vendor Quote	Procurement Documents	3
ST-220-CA	Procurement Documents	3
ST-220-TD	Procurement Documents	3
C-105.2 Workers Compensation	Vendor Responsibility and Integrity	4
DB-120.1 Disability	Vendor Responsibility and Integrity	4
Vendor Lexis Nexis	Vendor Responsibility and Integrity	4
Vendor Responsibility Questionnaire	Vendor Responsibility and Integrity	4
Vendor Responsibility Profile	Vendor Responsibility and Integrity	4



**Department
of Health**

Example to send
to vendor

ANDREW M. CUOMO
Governor

HOWARD A. ZUCKER, M.D., J.D.
Acting Commissioner

SALLY DRESLIN, M.S., R.N.
Executive Deputy Commissioner

May , 2019

Dear Mr.

I am pleased to inform you that _____ has been selected as the vendor for the Department of Health's IFB #17882 entitled "Disposal of Regulated Medical Waste and Pathological Waste."

The Award to _____ is contingent upon:

- Approval of the contract by the New York State Office of the State Comptroller.

Congratulations on your successful bid. We look forward to working with you upon contract approval. Please contact me at (518) 485-6789 if you have any questions.

Sincerely,

Corey Bennett
Asst. Biosafety Officer

Example to send



Department
of Health

to vendor

ANDREW M. CUOMO
Governor

HOWARD A. ZUCKER, M.D.,
J.D.
Acting Commissioner

SALLY DRESLIN, M.S., R.N.
Executive Deputy Commissioner

May , 2019

Dear Mr.

This is to advise you of the outcome of the Department of Health's IFB #17882 entitled "Disposal of Regulated Medical Waste and Pathological Waste." The successful vendor is _____.

As the IFB indicates, you may request a formal debriefing of your proposal. It will be limited only to your proposal and will not include any discussion of other proposals. Request must be received no later than fifteen (15) calendar days from the date of this letter.

The Department of Health thanks _____ for its participation in the IFB procurement process and looks forward to your continued interest in any further procurements.

If you have any questions, please contact me at (518) 485-6789.

Sincerely,

Corey Bennett
Asst. Biosafety Officer

OFFICE OF THE STATE COMPTROLLER - BUREAU OF CONTRACTS

VENDOR RESPONSIBILITY PROFILE

The Vendor Responsibility Profile, with applicable attachments, is designed to provide the Office of the State Comptroller (OSC) with the required procurement record documentation for those contract transactions requiring vendor responsibility documentation. The Vendor Responsibility Profile includes a State contracting entity Responsibility Determination, signed by an authorized signatory, and the State contracting entity's documentation of the basis for its responsibility determination, including any non-responsibility determinations. The State contracting entity must document any information compiled by the State contracting entity in the course of its responsibility review and must submit any information provided by the proposed contractor, including the proposed contractor's completed paper questionnaire, if one was used. (Note: If the New York State VendRep System was used, the State contracting entity should **NOT** print and submit the online questionnaire.)

OSC has identified certain transactions which may have different vendor responsibility documentation requirements. The application of these various requirements is summarized in the *Vendor Responsibility Documentation Requirements* table, which is available on our website. See <http://www.osc.state.ny.us/vendrep> for additional information. Unless the transaction is exempt as indicated in the Documentation Requirements table, Parts I & III are required for all transactions submitted to OSC for approval.

INSTRUCTIONS

Part I – Contract Information *(Complete for all transactions)*

Items 1 through 15

- 1) **Business Unit** – enter the State contracting entity's code;
- 2) **Department ID #** – enter the State contracting entity's 7-digit department code;
- 3) **Department Name** - enter the State contracting entity's name;
- 4) **Contract/PO #** - enter the contract or purchase order number;
- 5) **Amendment Sequence Number** – if the transaction is an original contract, enter "0."
All amendments will be incremented by 1;
- 6) **Transaction Amount** – enter the value of the contract transaction being submitted;
- 7) **Total Contract Value** - enter the current total value of this contract, including any changes to the original contract value. For new contracts, this will be the same as the transaction amount;
- 8) **Vendor Name** – enter the vendor's name, matching the Vendor Master file;
- 9) **NYS Vendor ID** – enter the vendor's 10-digit NYS Identification Number;
- 10) **Taxpayer ID/EIN #** - enter the vendor's EIN or SSN, if a sole proprietor;
- 11) **Contractor Type** – indicate whether the vendor is the prime contractor or a subcontractor;
- 12) **Contract Description** – enter a brief description of the contract;
- 13) **State contracting entity contact for this transaction - Name, Phone, E-mail** – enter the information for the State employee who should be contacted regarding vendor responsibility issues for this transaction;
- 14) **Were any issues disclosed by vendor and/or found by State contracting entity?** – indicate by checking "Yes" or "No." These issues may have been disclosed by the vendor or identified by the State contracting entity. Use Attachment A, Item 1 to document the issues and the State contracting entity's assessment.

Example
AVR P
Questions

OFFICE OF THE STATE COMPTROLLER - BUREAU OF CONTRACTS

VENDOR RESPONSIBILITY PROFILE

15) If this is a new contract or renewal, has the vendor's documentation of New York State Workers' Compensation and Disability Benefits coverage or exemption been verified as accurate, up to date, and included as part of the procurement package as outlined in GFO XL.18.G? – indicate by checking “Yes,” “No” or “N/A.” Except for contracts with municipalities, contracting entities must include all necessary proofs of insurance, as detailed in the GFO, with the procurement record for new contracts and contract renewals submitted to OSC for approval. Contracts will not be approved without such proof. OSC may immediately reject any contract submitted without such proof.

If the transaction does not meet the requirements to submit the documentation, select “N/A.” If “No” is selected, use Attachment A, Item 2 to provide the details of why the documentation is not provided.

By adding this question to the Profile, it serves as a reminder to include this documentation, where appropriate and provides the opportunity to explain why it is not included.

Part II – Vendor Disclosure and State Contracting Entity Process

Complete for new contracts valued at \$100,000 or more, or amendments that bring contract value to \$100,000 or more for the first time.

Item 16 - Vendor Disclosure

Identify the various items of disclosure provided either directly, or indirectly, by the vendor. Check all that apply and describe those disclosure items not included in the list provided. Vendor disclosures could include the vendor responsibility questionnaire (indicate date certified by vendor), audited financial statements, SEC or 990 filings, internal or external vendor communications, or information obtained from the vendor's website. Attach all pertinent information, unless the information is found on the VendRep System. Any information found on the VendRep System should **NOT** be printed for OSC.

Item 17 - State Contracting Entity Process

Describe the steps taken by the State contracting entity to determine vendor responsibility. In documenting your process, include your consideration of the vendor disclosure items identified in Item 16 and your independent research. Such research could include Internet sources, State contracting entity records, communication with the vendor, internal and external State contracting entity communication, and past experience with the vendor. Include this description on Attachment A, Item 2.

Part III – State Contracting Entity Responsibility Determination *(Complete for all transactions)*

After performing an affirmative review of the vendor's responsibility, check the box that best fits the State contracting entity's responsibility determination. If the vendor is found to be non-responsible, the State contracting entity should document that due process was provided and include a Vendor Responsibility Profile for the next ranked vendor.

The determination must be signed by an authorized signatory of the State contracting entity. The signatory's printed name, title and the date must be included.

OFFICE OF THE STATE COMPTROLLER - BUREAU OF CONTRACTS

VENDOR RESPONSIBILITY PROFILE

Attachment A

Item 1: Issue Detail

For each issue found by the State contracting entity or disclosed by the vendor, describe the issue and its resolution. The “Resolution” field should reflect the State contracting entity’s assessment of the issue, its relevance to the vendor’s responsibility for this procurement, and any corrective or mitigating actions taken by the vendor or State contracting entity in response to the issues. Also, attach any source documents used to support the issue detail.

Item 2: State Contracting Entity Process

If “Yes” is the response to Item 17, describe the steps taken by the State contracting entity to determine vendor responsibility. In documenting your process, include your consideration of the vendor disclosure items identified in Item 16 and your independent research. Such research could include Internet sources, State contracting entity records, communication with the vendor, internal and external State contracting entity communication, and past experience with the vendor. Do not submit copies of website search results or information found on the NYS VendRep System. If the State contracting entity used a Resource Checklist, it is acceptable to submit the completed list to OSC rather than providing a description of the process.