

**DEPARTMENT OF STATE POLICE
1122 PROGRAM – PROCUREMENT REQUEST**

TO: Virginia State Police
 Attn: Bobby Thomas, 1122 Program Manager
 P.O. Box 27472
 Richmond, Virginia 23261-7472
 Phone: (804) 674-2153 Fax: (804) 674-6716 E-mail: bobby.thomas@vsp.virginia.gov

SHIP TO: Agency Name: _____
 Street Address: _____
 City/State/Zip: _____
 Contact Name: _____
 E-mail address: _____
 Phone Number: () _____ Fax: () _____

VENDOR NAME: _____
VENDOR ADDRESS: _____

Item Description	Qty	Unit	Unit Price	Amount
Total Amount of Purchase				

Attach: (1) quote from vendor
 (2) check payable to **Virginia State Police – 1122 Program** for the entire purchase amount

Mail the check, this form and the vendor quote to address at top of form.

Requesting agencies may be required to substantiate in writing the connection to counter-drug activities for any items requested to be purchased through the 1122 Program.

Purchase Authorized By:

 Signature and Title