6-27-2016

Purchase Requisition: High Plains Insurance, Inc.

Purchasing Division, State of Kansas Department of Administration

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I hereby certify that there are sufficient unencumbered funds in the allotment or appropriation from which this request is to be paid; that the items listed are required for the function of this agency. Purchase of the items listed below and/or the encumbrance of necessary funds is requested.

<table>
<thead>
<tr>
<th>ITEM NO.</th>
<th>ON HAND</th>
<th>REQUESTED QUANTITY</th>
<th>UNIT</th>
<th>DESCRIPTION OF ARTICLE OR SERVICE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td>Invoice Dated 4-28-67, High Plains Insurance, Inc.</td>
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<tr>
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<td></td>
<td></td>
<td>Policy No. 2 82 21 31</td>
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<td></td>
<td></td>
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<td>Company: Aetna</td>
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<td></td>
<td></td>
<td>Endorsement to add coverage for Library &amp; Contents as requested by Grant Agreement under Higher Education Facilities Act.</td>
</tr>
</tbody>
</table>

CONFIRMATION REQUESTED

Suggested Vendor:

High Plains Insurance, Inc.
Hays State Agency
P.O. Box 100
Hays, Kansas 67601

NOTE: FOR UNUSUAL ITEMS INDICATE SOURCE OF SUPPLY ON REVERSE SIDE.