



3275 N. M-37 Hwy.  
P.O. Box 247  
Middleville, MI 49333-0247  
800-632-4572  
hpsgpo.com

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The information in this document,  
and in all related attachments,  
is proprietary and for HPS Members only.

**HPS Letter of Participation (LOP)**

**#1107 Tech24**

HPS Contract #/Vendor: \_\_\_\_\_

Member Name: **Marion Co. Schools**

Legal Business Name: **Marion Co. Schools**

Address: **755 East Main**

City, State and Zip Code: **Lebanon, KY 40033**

Type of Facility: **Education**

HPS Member Number: **3222**

Member Affiliates: **N/A**

*(attach list if necessary)*

This form designates HPS as the Group Purchasing Organization for the facilities and affiliates listed above. Further, this form authorizes the vendor listed above to establish account(s) allowing the Member to access the vendor's HPS contracts/services/products/pricing.

**Chris Brady**

Name

**270-692-3721**

Phone #

**Superintendent**

Title

**12/16/25**

Date

Email (optional)

Signature

*Please email completed form to [LOP@hpsgpo.com](mailto:LOP@hpsgpo.com) or fax to 269-795-9788.*