JUSTIFICATION FOR SOLE SOURCE PURCHASE

Must accompany requisitions of $5,000.00 or more if substitution of supplier or item is not acceptable.

1. TO BE COMPLETED BY REQUISITIONER

VENDOR:____________________________________  REQUESTER:_____________________
DEPARTMENT/CENTER:____________________________________________________________
ITEM DESCRIPTION:_______________________________________________________________
FUND SOURCE                UNIVERSIT Y              GRANT OTHER
PRICES REFLECT ☐ UNIVERSITY ☐ GRANT ☐ VENDOR QUOTE ATTACHED ☐ OTHER

A. Substitution of Requisitioned Item(s) is not possible because(check all that apply)

☐ Item must match existing equipment (explanation required)

☐ No other known item meets the following specification

☐ Available substitutes not acceptable (explanation required)

☐ Other

B. Substitution of Supplier is not possible because supplier is:

☐ The only known manufacturer   ☐ The only known distributor
☐ The only source for service   ☐ The best source of service
☐ The only supplier that can deliver by __________________________
☐ Other __________________________

Signature of Account Executive________________________________   Date ___________________

2. TO BE COMPLETED BY OFFICE OF RESEARCH (if Research Account is to be charged)

☐ Sole Source Justification appears appropriate OR

☐ Inappropriate as follows____________________________________________________________

Approved Signature ________________________________                       Date__________________

3. TO BE COMPLETED BY PURCHASING DEPARTMENT

☐ Sole Source Justification appears appropriate OR

☐ Inappropriate as follows____________________________________________________________

Approved Signature_________________________________                       Date ___________