

# Justification for Sole Source Purchases

Date \_\_\_\_\_ Bus Unit \_\_\_\_\_ Requisition # \_\_\_\_\_

1 Vendor (Suggested Source) \_\_\_\_\_

2 The item is required for use in (check all that apply):  
Office \_\_\_\_\_ Classroom \_\_\_\_\_ Lab \_\_\_\_\_  
Other (explain) \_\_\_\_\_

3 What features or functions are unique to this item?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How are these dimensions or performance characteristics essential to the accomplishment of your work?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4 List all known companies, other than your suggested source, that manufactures a similar item or manufactures an item with similar functions.  
\_\_\_\_\_  
\_\_\_\_\_

5 Why are the above competing companies' products (if any) not satisfactory?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6 Will this item be used with existing equipment (yes or no)? \_\_\_\_\_  
If yes, check all that apply. The item will be used . . .  
as a repair/replacement part \_\_\_\_\_ as a component to be interfaced \_\_\_\_\_  
as an accessory or option \_\_\_\_\_ to match existing equipment \_\_\_\_\_  
for reasons of interchangeability \_\_\_\_\_

Identify brand, model, and serial number of existing equipment (if applicable):  
Brand \_\_\_\_\_ Model \_\_\_\_\_ Serial # \_\_\_\_\_

7 Provide any additional information that may aid the buyer in processing the requisition.  
\_\_\_\_\_  
\_\_\_\_\_

## Justification for Sole Source Purchases

I certify that the above statements are true and correct to the best of my knowledge. I also certify that neither I nor my family members will gain or receive any additional benefit because I have recommended that this acquisition be obtained solely from a designated vendor or contractor.

\_\_\_\_\_  
Person Requesting Proprietary Purchase \*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\* For research grants, this person must be the Principle Investigator or designee.

Department

College/Division

\_\_\_\_\_  
College/Division Administrator

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Purchasing Department Approver

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date