

Signature

Date

Unauthorized Purchase Justification

Department Name: Print Name: Vendor Name:		Colleague Req. No.	Telephone No. Date: Amount:
		Signature: Date of Purchase:	
2.	Provide justification of why normal pro	ocurement procedures were NOT followe	d for this procurement.
3.	Provide a statement of why you should	I NOT be held personally liable for the co	st of this procurement
4.	Describe measures you will take to avo	id a recurrence of an unauthorized purcl	nase in the future.
l	nsaction with the person making the ur	ledge receipt of the above unauthoria	zed procurement and have discussed
	re Date I: (Completed by the Director or Associ		