Purchasing Services
SUPPLIER SELECTION JUSTIFICATION

**Instructions:** Complete this form when seeking to purchase items or services $25,000 or more or $10,000 or more when using sponsored funds. This form and quote can be attached to the Marketplace requisition or forwarded to Purchasing Services. The elements to be satisfied are:

1) Cost basis (bids or quote)
2) Justification/Rationale for the supplier selection

This documentation is not required when using Purchasing Services Preferred Suppliers.

FIS Document #: __________________ Supplier Name: __________________

Product Description: ___________________________________________________

Supplier selection was based on:

☐ Competitive Bid Process

Attach supplier proposals and define rationale for supplier selected:

____________________________________________________________________
____________________________________________________________________

If no competition was utilized, check the appropriate box.

☐ Emergency Purchase: _________________________________________________

☐ Architect/Engineering Fee Schedule

☐ Other: ______________________________________________________________

Additional Information (attach a second sheet, if necessary):

____________________________________________________________________
____________________________________________________________________

Submitted by: __________________ Date: ______________

Approved by: __________________ Date: ______________

(PI, Dept Bus Mgr, Dept Head, Lab Mgr)

Purchasing Services Approval: __________________ Date: ______________

☐ ☐

Notes:_________________________________________________________________

____________________________________________________________________

PO#: __________________

Fiscal Year: ____________

Revised May 2018