



# Non-Conforming Purchase Justification Form

(After-the-Fact Purchase Justification)

**FIU Procurement Policy II.4.2. FIU entities are not authorized to place orders directly with suppliers for goods or services for which a purchase order (PO) is required.** When an invoice has been received for goods and/or services and a PO has not been issued and payment cannot be made with a PCard or is not an allowable unencumbered payment purchase, then a Non-Conforming Purchase Justification Form must be completed.

I, (Name) \_\_\_\_\_ (Title) \_\_\_\_\_ (Panther ID) \_\_\_\_\_, attest that I authorized/requested the purchase/contract for goods/services on behalf of FIU Board of Trustees as follows:

Purchase Date: \_\_\_\_\_ Received Date: \_\_\_\_\_ Amount to be Paid: \_\_\_\_\_

Supplier Name: \_\_\_\_\_ Supplier ID: \_\_\_\_\_

Dept. ID: \_\_\_\_\_ Dept. Name: \_\_\_\_\_ Dept. Phone Number: \_\_\_\_\_

Activity #: \_\_\_\_\_ Fund: \_\_\_\_\_ Project ID: \_\_\_\_\_

<b>Description and purpose of the goods or services purchased/contracted, include if this is Other Capital Outlay, equipment &gt;\$5k (OCO):</b>
<b>Explanation of why this non-conforming order was placed prior to a valid PO/contract being issued:</b>
<b>Explanation of what steps the department has taken to prevent non-conforming purchases in the future:</b>

**Note:** *Unauthorized purchasing actions could be serious violations of FIU policies and state laws that could have detrimental consequences to the University's resources and reputation. Violators may be directed to pay the supplier with personal funds, and disciplinary action may be taken against the employee. This form must be completed in order for payment to be processed. The appropriate Expense Manager and Business Unit Head must approve all requests, in addition to the Procurement Director. The Provost or CFO, as appropriate\*, will be required to approve any non-conforming purchase requests that are over \$5,000 or if this is a third offense for purchases under \$5,000.*

Based on the forgoing declaration I (Non-Conformer) am attaching the original supporting documentation (invoice or receipt for payment) and hereby request that the University: \_\_\_\_\_ **PAY THE SUPPLIER** or \_\_\_\_\_ **EMPLOYEE WILL PAY SUPPLIER USING PERSONAL FUNDS**

Name of Non-Conformer: \_\_\_\_\_ Signature: \_\_\_\_\_

Name of Expense Manager: \_\_\_\_\_ Signature: \_\_\_\_\_

Name of Business Unit Head: \_\_\_\_\_ Signature: \_\_\_\_\_

Name of Procurement Director: \_\_\_\_\_ Signature: \_\_\_\_\_

Reserved for Procurement Director
Name of CFO or Provost*: _____ Signature: _____
<b>This employee (Non-Conformer) has had _____ non-conforming purchases at a total cost of _____.</b>