Broward Community College

P-19 Form

Record of Justification for Non-compliant Order

DEPARTMENT:	CAMPUS:
ORIGINATING COST CENTER:	GRANT COST CENTER (IF APPLICABLE):

This form shall serve as official record of justification for placing any order with a vendor when said order is not in compliance with College Policy and Procedure. This form must be completed by the individual placing the order and authorized by the appropriate administration levels indicated below. This form shall be retained with confirming Purchase Order or Disbursement Request for audit purposes.

NAME OF EMPLOYEE PLACING ORDER WITH SUPPLIER:	NAME OF SUPPLIER EMPLOYEE ACCEPTING ORDER:
EMPLOYEE SIGNATURE:	DATE ORDER PLACED:

College Policy 6HX2-6.12 states all authority for purchasing has been delegated to the Purchasing Department only by the President. Your statement of justification is required for the State Auditor.

SIGNATURE DEAN/ASSOCIATE VICE-PRESIDENT::	DATE:
SIGNATURE PROVOST/VICE-PRESIDENT:	DATE::