



# Non-Conforming Purchase Justification Form

Name \_\_\_\_\_

Department \_\_\_\_\_ Phone Number \_\_\_\_\_

**Description of Non-Conforming Charge – please check all that apply:**

\_\_\_\_ Order Placed directly with vendor without a purchase order when a purchase order and/or contract was required

Explanation of why this non-conforming order was placed prior to a valid P.O. or contract being issued:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_ Transaction did not meet year-end cutoff requirements

Explanation of why the expense was submitted subsequent to the year-end fiscal close date:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_ Other: Please describe the transaction

\_\_\_\_\_  
\_\_\_\_\_

Explanation of steps taken by the department to prevent future non-conforming transactions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employee Signature \_\_\_\_\_

VP Finance Signature \_\_\_\_\_