

REQUEST TO USE NON-CONTRACTED SUPPLIER

For purchases over \$250,000, use this form when a UCOP or UCI Contracted Supplier is available but you want to complete your purchase using a Non-Contracted Supplier.

Please send the completed form to Procurement@uci.edu and include documentation relevant to the proposed purchase (Statement of Work, invoice, etc.).

Date: _____ Department, Division, School: _____

KFS Req # _____ Total Amount of Purchase: _____

Name of Non-Contracted Supplier: _____

Description of Purchase: _____

Name & Contract # of Contracted Supplier: _____

Please explain the business reason why the Contracted Supplier cannot be used for this purchase:

Requestor: _____ E-mail: _____ Tel: _____
Name

Dept Head Approver: _____
Signature of the Dept Head (or designee)

Division/School Approver: _____
Signature of the Dean/Vice Chancellor (or designee)

Procurement Services

Reviewed on: _____ Reviewed By: _____
Procurement Signature

Use of Non-Contracted Supplier is _____ Approved
_____ Not Approved

Comments: _____