CAL POLY POMONA FOUNDATION, INC

JUSTIFICATION OF SOLE SOURCE/SOLE BRAND REQUEST

Request for Purchase Order No._____ Item/Description_____

SOLE SOURCE: Item is available from only one vendor.

JUSTIFICATION: Please see the following for further information and justification, line items 1 through 8.

1. Is item requested a <u>one of a kind</u> ITEM? Explain how this was determined.

2. Why was this particular product and/or vendor chosen?

3. Can purchase be made from another vendor? If no, why not? Is chosen vendor the manufacturer?

4. Do you require an item with unique features to successfully perform your service? Why are these specific performance features required to perform your function? What is the function?

5. What are the unique performance features of the product you have specified that are not available in any other brand or product? Itemize and describe each.

6. Are these features available in other models?

7. What other comparable models currently in production have been examined and why were they rejected? Provide brand name, model, vendor name, date and name of each person contacted. Complete "Telephone Quote Worksheet" on the reverse side of the requisition to purchase or attach written quotations from vendors.

8. To "match and intermember" is not normally an acceptable justification for sole brand. When you determine this is a justified factor which should be considered, the quantity, manufacturer, brand, model, and the necessity for "interfacing" must be provided.

PURCHASE ORDERS OVER $15,000 SHOULD BE BASED ON <u>FORMAL BID SPECIFICATIONS</u>, AND DOCUMENTATION MUST BE ATTACHED.

I am aware of the Foundation requirements for competitive bidding and the established criteria for justification of sole source/sole brand purchasing. As an authorized department representative, I have gathered the required technical information and have made a concentrated effort to review comparable/equal equipment. This is documented in this justification. I hereby certify the validity of the information and feel confident this justification of sole source/sole brand meets the Foundation's criteria.

_____	_____	_____	_____
Requested by	Date	Approved by Department Head	Date
_____	_____	_____	_____
Approval by Foundation Accounting	Date	Approval by Foundation Administrator	Date