



Prepared by: _____ Department: _____ Date: _____

Supplier Name: _____ Total Purchase Amount: \$ _____

- Emory Express Requisition
- Compass Payment Request
- Corporate Card or P-Card
- Other

Policy: This Request for Single/Sole Source Form must be completed for purchases where competition is restricted or limited in accordance with Strategic Procurement Policy 2.121. **All parts must be completed in their entirety**, providing a complete explanation of why the good(s) or service(s) cannot be obtained through competition. Attach additional pages if needed and attach supporting documentation where required. A new form is required for each purchase.

Certification: The department supervisor, Director, or departmental Finance representative (example: CBO) should sign as "Approver." **Wet or encrypted signatures are preferred** and confirms the Approver has reviewed and approved this Single/Sole Source Form. The Approver cannot be the Preparer listed above.

System Attachments: Upload this completed form and all supporting documentation to the applicable system (Compass Payment Request, P-Card, Corporate Card, Emory Express, etc.). Strategic Sourcing and/or your Finance department may require additional information and/or may determine that a competitive bid/solicitation is required. **Failure to attach this Form and applicable supporting documentation will result in the Form being returned to the department.**

PART I: Supplier and Good(s)/Service(s) Purchase Request

Supplier's Contact Name: _____

Were other suppliers were considered:

Phone: _____ Email: _____

Brief Description of Good(s) or Service(s) being purchased. Provide a description of your purchase. If you evaluated other good(s)/service(s) and they were deemed unsuitable, provide those supplier name(s), contact information, description of item, and your rationale for exclusion from this policy. Also include relevant correspondence and quotations received concerning other good(s)/service(s) considered.

PART II Reasoning: Check the box that best describes why this purchase is precluded from Policy 2.121.

- True Sole Source:**
No other supplier exists to provide the good(s) or service(s). Describe the unique characteristics of the good(s) or service(s). The quotation is attached, and the prices/terms are deemed reasonable for the value presented. *Price alone cannot be used as a factor in determining if a Sole Source exists because it indicates the existence of a competitive marketplace.*

Single Source Options:

- Other suppliers cannot be used.** Use of this supplier is required for compatibility with standardized or existing equipment or granting or another governing agency. Attach a copy of the documentation showing the system or services requirements, or award page referencing those requirements. The Federal awarding agency or pass-through entity expressly authorized noncompetitive proposals in response to a written request from the non-Federal entity.
- Exigency:** Life, safety, or health must be sustained through the immediate delivery of products or performance of services. Procurement is limited to the duration to address/remedy the exigency. A critical agency mandate, statutory or operational requirement must be fulfilled immediately. Please explain the emergency circumstances.
- Inadequate Competition:** After solicitation of several sources, competition is determined inadequate. Attach documentation of supplier responses.



PART III Reasonable Price Establishment: Check the applicable box to confirm the accepted price is fair and reasonable. Attach supporting documentation to support your submission of this form.

- The price was obtained from a catalog, standard price list, or is standard pricing and/or proposal that this supplier charges for like good(s) and /or service(s) sold to the general public. (Catalog or price list must be provided or be on file.)
- The quoted prices are lower than prices available to the general public and reflect substantial savings or are equal to or lower than those offered to any government agency or private institution. (Attach price list.)
- Good or service is so unique there is no reasonable comparison. Explain your rationale and the process you used to determine this (Attach copies of website review, email from supplier, or other supporting documentation.)

PART IV: Detail your reasoning to support selections in Parts II and III. If additional space is needed, include explanation(s) as attachments to this form.

PART V Attestation: Departmental Certification

Wet or any encrypted digital signature preferred. You can use Emory's DocuSign license for encrypted signatures. Use SSO to access the OIT Knowledge Base Article: https://emory.service-now.com/kb?id=kb_article_view&sysparm_article=KB06501

I certify that to the best of my knowledge, I have investigated and found that the above reasons and explanations justify waiver of competitive bidding and the reasonableness of the price. I am the individual who has confirmed the provided information is accurate, and any further questions regarding these details can be directed to my attention. I certify that this purchase will not present a conflict of interest, nor have individuals involved in this request received gifts or gratuities from this supplier, per Emory's Conflict of Interest Policies.

Supervisor, Director, or Departmental Finance representative

APPROVER SIGNATURE*: _____ Date: _____

Name: _____ Title: _____

Department: _____

**Sole source attestation does not constitute delegated signature authority per Policy 1.2.*