

**Southern Connecticut State University Foundation, Inc.**

**Purchase Approval Form**

(Including Consultants and Other Service Contracts)

**PURCHASE APPROVAL:**

**Under \$2,500**

- No pre-approval is required, except as noted (see NOTE below).

**\$2,500 - \$4,999**

- Purchase approval is required. SCSU provided goods and services are exempt (i.e. duplicating, campus food service, etc.). Multiple quotes are not required, except as noted (see NOTE below).

NOTE: To avoid a conflict of interest, anyone who wishes to make a purchase exceeding \$250 from a related party, must attach a minimum of two price quotes.

**\$5,000 & above**

- Quotes and purchase approval are required. Attach a minimum of three price quotes. Identify the selected supplier below.

**PURCHASES THROUGH THE SCSU FOUNDATION ARE NOT RESTRICTED TO THE LOWEST QUOTE.**

**INSTRUCTIONS:**

1. Complete form and attach quotes, if required, as described above, and fax to Foundation Business Office at Ext. 26508
2. Foundation Business Office will fax back approval or disapproval and will keep original form on file pending receipt of Disbursement Request Form.
3. Program Director **may place the order after receipt of an approved "Purchase Approval" form.**
4. To authorize payment of the invoice, attach approved copy of "Purchase Approval" form and an original invoice to a completed "Disbursement Request Form."

**SCSU FOUNDATION PROJECT ACCOUNT**

Date _____	Project ID _____	Program Name _____
Completed by: _____		Tel Ext _____
Authorized Signer: _____ (print)		_____ (signature)
Foundation Approval: _____		Date _____

**PURCHASES**

Quantity	Unit	Description	Unit Cost	Total Cost	Selected Supplier NOT RESTRICTED TO THE LOWEST QUOTE
					Name:      Address:
					____ Supplier is a related party
Total:					<b>\$5,000 + - Attach 3 quotes</b>