

West Valley-Mission Community College District

General Services 14000 Fruitvale Ave., Saratoga, CA 95070

Unauthorized Purchases of Goods or Services Declaration Form

Accounts Payable and/or General Services has received the attached invoice without a corresponding purchase order (PO) for a department at your College, or under your area of responsibility. Please inform this department that District purchasing procedures require the use of an approved, signed PO issued by the General Services Department before the purchase can be made or the service begins. Purchases made, or services obtained, without a PO are considered an unauthorized purchase/service. If the Department accepts responsibility for payment of charges incurred from an unauthorized purchase, they must submit this form along with a copy of the purchase requisition to the purchasing manager in order to initiate the PO and allow for subsequent payment. Please see that the ordering department/individual complies.

Vendor Name	Vendor #	Unauthorized Item(s) or Service(s)	Invoice #	Invoice Date	Invoice Total

Reason(s) District purchasing procedures were not followed:

Measures taken to prevent reoccurrence:

Certification (from department manager or immediate supervisor overseeing the individual who procured the unauthorized goods/services)

I certify that the statement above is true and accurate, the purchase was necessary and appropriate, WVMCCD will benefit from the purchase, all goods were received and/or services were performed, appropriate funds are available for payment, and the price charged is reasonable. In addition, I have read and agree to comply with AP 6330 and 6340 regarding future transactions.

Name: _____

Title: _____

Department: _____

Signature: _____ Date: _____

REQ #: _____

Department Approval : Vice Chancellor, Administrative Services or College Vice President, Administrative Services

I approve payment of the incurred charges resulting from the unauthorized purchase described above.

Name: _____

Title: _____

Department: _____

Signature: _____ Date: _____

Send completed form, along with a copy of the requisition to the Director, General Services

General Services 11.20.13

