## Procurement Noncompliance Form

<table>
<thead>
<tr>
<th>Date:</th>
<th>Requisition No:</th>
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<tbody>
<tr>
<td><strong>Department:</strong></td>
<td><strong>Department Head:</strong></td>
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### Process:
When a department discovers that a purchase was made without following the procurement code, rules and regulations, or small purchases executive order, the Department Head, Dean, or Director or authorized designee must submit this form along with an approved invoice and requisition to the Chief Procurement Officer of Procurement Services requesting approval of the improper purchase.

### 1) Explain the circumstances surrounding the purchase and why procedures were not followed

_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

### 2) Describe corrective action measures implemented to prevent recurrence

_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

### 3) Advise if vendor is unwilling to accept the return of goods, or if items have been already used or disbursed

_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

I hereby declare the information herein to be true and accurate to the best of my knowledge. I understand any false or misleading information may be considered a violation under the LA Procurement Code and can subject me to prosecution and penalty under Louisiana Revised Statute 39:1679.

Name____________________________   Signature_________________________   Date____________________

Telephone Number____________________________   Fax Number__________________________

Email Address __________________________

Department Head Signature _________________________________   Date ______________________

If approval is authorized, the paperwork will be sent to Accounts Payable. If it is not approved, it will be returned to the department to be paid with non-University Funds.

Request: [ ] Approved [ ] Denied  _________________________________   Date:____________________

Chief Procurement Officer

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