



After the Fact (ATF) Justification Form

UC Santa Cruz Procurement & Supply Chain Services

Important: Form must be filled out in [Adobe Reader](#) or Acrobat Professional 8.1 or above. To save completed forms, Acrobat Professional is required. For technical and accessibility assistance, contact finaff-tech@ucsc.edu.
Form questions: buy4me@ucsc.edu

Section 1: Supplier & Campus Authorizer Information

Supplier:

Department:

Invoice/Req. Number:

Individual who authorized or ordered goods/services:

The purchase associated with the supplier referenced above has been committed to the supplier without proper authorization. Procurement authority in the University of California system flows from the Regents through delegations to the Director of Materiel Management for the Campus. Any purchase that is made outside of the authority delegated by the Director of Materiel Management/CPO is an unauthorized commitment of University funds and becomes the personal responsibility of the person making the unauthorized purchase. Specific policy, [UC Business and Finance Bulletin 43, Part 1, Section H, UNAUTHORIZED PURCHASES](#).

Section 2: Explanation & Justification

Based on a 2018 audit by UCSC Audit & Management Advisory Services (AMAS), ATF purchases were found to be excessive and create undue cost and risk to the University. The recommended corrective action to reduce these purchases is to require additional approval from the department head. Please complete this form and submit to PSCS by attaching to a CruzBuy requisition.

1. Provide a detailed description of the goods/services that were contracted for:

2. What steps did the department take to ensure that a fair and reasonable price is being paid for the goods or services?

3. Explain why this unauthorized After the Fact purchase was made prior to submitting a requisition and establishing a valid University purchase order number. What happened?

4. What actions will be taken in the future to avoid ATF purchases?

Section 3: Department Approval

By approving and submitting this form for processing, the department assumes all risks associated with this unauthorized transaction. This includes liability due to gaps in coverage for: insurance, wages, data security breaches and intellectual property rights.

Departmental Authority Name:

Title:

(Print Name and Title, **Dean, Asst. Dean, VC, AVC, Director**)

Departmental Authority Signature:

Date:

Note: After 3 occurrences by the same individual this form must be signed by the Dean or VC.

Note: The Director of PSCS will review all ATF purchases on a case by case basis, and will have the option to disapprove any request that was not determined to be an emergency, or when a purchase order could have been obtained. Disapproval will result in the cost of the purchase being borne by the individual who contracted with the supplier without a University purchase order number.