

Eligible for Sole Source/Brand Name:

## **SOLE SOURCE / BRAND NAME JUSTIFICATION**

Purpose: As a recipient of funding from a variety of federal/state agencies and private donations, CSUSM Corporation must ensure price fairness and reasonableness by documenting the due diligence process. This can only be appropriately documented when the competitive bid process is used. In the absence of the bid process, the Sole Source/Brand Name Justification form must be completed and signed, and may be subject to audit.

This form must be completed and submitted with your purchase requisition and additional supporting documentation. Incomplete justification or documentation for a request for a sole source procurement will result in delays or a solicitation of bids. CSUSM Corporation reserves the right to solicit competitive proposals or sealed bids for any procurement.

Not Eligible for Sole Source/Brand Name:

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·	<ul> <li>Personal preference for a product or vendor. (i.e. I worked with this vendor in the past and like their work.)</li> <li>Cost, vendor performance, local service, maintenance, &amp; delivery (factors evaluated in a competitive bid)</li> <li>Need and use for the equipment unless relates to unique features.</li> </ul>	
knowledge/skill set that can provide the service needed.	A product made by one manufacturer but sold by several vendors.	
GENERAL INFORMATION	SUPPLIER INFORMATION	
Fund - Project #:  Requisition #:	Supplier Name:  Contact Name:	
Requestor Name:  Procurement Type: Supplies Services Lease	Email / Phone:  Equipment Independent Contractor	
What are you requesting to purchase & how does it support the project objectives? Provide a description of the goods/service you want to purchase.		
For equipment or supplies provide Manufacturer Name:	and Model #:	
How was your investigation conducted and how did you de General Internet Market Searches     CSUSM University Contract (No)     CSU Master Contract (No)     Other (please list):	etermine your request may qualify as a sole source/band name? Federal vendor lists (e.g. SBA, SAM, GSA) Peer Recommendations Publications/Journals, Trade Shows, etc.	
• List all sources you identified and investigated to determine no other source exists for similar products capable of meeting the necessary requirements:		
JUSTIFICATION for SOLE SOURCE or BRAND NAME purchase of \$10,000 and greater		

Please indicate the type of justification:

**Sole Source:** Product/Service is only available from one vendor.

Brand Name: Only the requested brand is acceptable. Bids have been solicited from vendors of the specific brand.

OSP Only: The Federal/Pass-through entity expressly authorizes non-competitive proposals in response to written request.

Public Exigency: The urgency/emergency for the purchase will not permit a delay resulting from competitive bid solicitation.

1. Describe the uniqueness of the purchase and why this vendor/product/service is the only that can be chosen:		
If the requested product/service is not procured, I product/service essential to your project objective		ct ? Describe the specific factors of the
3. List the reasons why other vendors/products/serv	vices have been examined a	and rejected.
4. Explain how the price was determined to be fair a	and reasonable.	
5. Attach documents which support the product/servother companies solicited who could not meet reconcument(s) Attached:	quirement) <b>OR</b> (b) has a leg	al right (patent, copyright) which identifies it as
6. Is this product/service identified by name, statem notice? If so, describe and attach the award doctors.		int in a sponsored project proposal or award
PI/PD CERTIFICATION AND SIGNATURE		
Please note that this certification is required to ensu	ure compliance with Federal	and State Law. Review it carefully before signing
<ol> <li>The undersigned acknowledges the requirer sole source/brand name purchases. As the auth verified efforts to review comparable and/or equipments the criteria for sole source/brand name, to</li> </ol>	horized signer, I certify to the ual products/services as doc	e validity of the technical information and have sumented in this justification. This information
<ol><li>I certify, to the best of my knowledge, neithe (including respective family members) of the ve</li></ol>		·
<ol> <li>I certify that neither I, nor my cohabitating pa any of these individuals, am/are associated, a) gain or other tangible personal benefit as a resu</li> </ol>	has a financial or other inter	
Printed Name: (Principal Investigator/Project Director)	Signature:	Date:stigator/Project Director)
CSUSM CORPORATION USE ONLY	(i inicipal inici	
Reviewed by:(Print Name)	_	
Approved by :	Signature:	Date:

CSUSM Corp. Executive Director/Designee

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