

AGENCY STATE USE EXCEPTIONS REPORT TO PURCHASING

Report due to the Purchasing Department by the 10th day of each Month

Instructions: Please complete this form when disbursing treasury (State) funds for the purchases or services offered by the Department of Texas Industry for the Blind and Handicapped (TIBH) but purchased from another source. E-mail completed form to pur_kjr@shsu.edu.

1. This report is for the month of _____, _____
2. Treasury (State) Funds Only
3. Name, department, and extension number of person providing this report:
 Name: _____
 Department: _____
 Extension Number: _____

Description of Products/Services Purchased as Exception	Requisition/Purchase Order Number	Date when Requisition/Purchase Order Created	TBPC Commodity Code (11 digits)	Quantity of Product or Duration of Service Purchased as Exception	Reason Purchase was Made Under Exception*	Unit Price (actual price paid)	Total Cost/Dollar Amount
TOTAL EXCEPTION PURCHASES MADE							
Monthly Total of Products Purchased from the State Use Program							
Monthly Total of Services Purchased from the State Use Program							

- *Acceptable Exceptions:
- | | |
|-------------|--------------------|
| 1. Quantity | 4. Life Cycle Cost |
| 2. Quality | |
| 3. Delivery | |