

UNIVERSITY OF HAWAII REQUEST FOR EMERGENCY PROCUREMENT

TO: _____
Name of Fiscal Administrator

FROM: _____
Name of Principal Investigator, Department Head, Administrator

Pursuant to Administrative Procedure 8.260 (goods and services) or 8.281 (construction), the Department requests approval for this emergency procurement.

Date: _____	After the fact: <input type="checkbox"/> Yes <input type="checkbox"/> No
Nature of the Emergency: 	

Vendor: _____	Amount: _____
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Description and purpose of goods, services, or construction to be purchased:
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Reason for Vendor Selection:
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Direct questions to: _____ Phone: _____

I certify that the information provided above is, to the best of my knowledge, true and correct.

Full Name of Principal Investigator, Department Head, or Administrator	Signature	Date
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Approved:

Full Name of Fiscal Administrator	Signature	Date
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Full Name of Vice President or Chancellor (if applicable)	Signature	Date
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APPROVED DISAPPROVED

Director, Office of Procurement Management, or Facilities Contract Manager, Facilities Business Office (if applicable)	Date
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APPROVED DISAPPROVED

President, University of Hawaii (if applicable)	Date
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