

BF-52  
05/2011

**NON-CONTRACT CLOTHING/APPAREL RELATED PURCHASE  
JUSTIFICATION AND APPROVAL FORM**

Org: \_\_\_\_\_

Date: \_\_\_\_\_

Requested by: \_\_\_\_\_

Merchandise Description: \_\_\_\_\_

Vendor Name: \_\_\_\_\_

Quantity Needed: \_\_\_\_\_ Total Cost: \_\_\_\_\_

Employee(s) assigned to (attach additional sheet if necessary):

\_\_\_\_\_  
\_\_\_\_\_

Brief Justification of the Purchase:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
*Requested by (Signature)*

\_\_\_\_\_  
*Approved by (Signature)*

**I am in agreement with this request. Please process.**

\_\_\_\_\_  
*Agency Head or District Engineer/Manager or Division Director*

*Accounting office use*

\_\_\_\_\_  
Org.      Auth#      Act.      034      Date sent to DOT P-Card Coordinator: \_\_\_\_\_  
Obj.      \*Submit with receipt attached