

Exemption # _____

CDCR Use Only

Attachment A

California Department of Corrections and Rehabilitation Exemption Request Form



Use this form to request an exemption from CALPIA for all products and/or services provided by CALPIA. This approved form or a formal exemption letter, constitutes CALPIA's written approval and must be maintained with the requesting department's purchasing documentation file as proof of exemption approval.



All highlighted information must be provided to complete your request.

Requesting Department Information

Agency: California Department of Corrections and Rehabilitation	Institution/Department (if applicable):
Approval required by either a Procurement and Contracting Officer (PCO) or Designee:	(Type names. Do not sign. Must be the same signature below)

Institution/Department Contact Information

Procurement Officer: Signature:	Street Address: Mailing Address:
Telephone: FAX: E-mail:	(Left column continues)

Required Contract Information

Contractor Name:		
Contractor Address:		
Purchase Order Total:	Attach Copy of Purchase Order and include Number here: (or attach quote sheet)	Requested Delivery Date:

Provide a brief description of the items requested in this Exemption Request Including all goods and/or services the contractor will provide: (Attach additional information if necessary).

Justification for Exemption Request: (To expedite your request, please provide an explanation as to why CALPIA cannot provide the goods and/or services needed) Attach additional information if necessary (i.e., catalog photocopy)

Required Approvals

Procurement and Contracting Officer (PCO) or designee: _____ Signature	California Prison Industry Authority Sales Manager or designee: Approved Denied _____ Signature
_____ Date	_____ Date

Submit completed form to: CDCR
 Department, Procurement & Contracting Officer
 By Fax (916) 255-6187