Print Form

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 same as signature below.)
Institution/Department Contact Information	
Procurement Officer:	**Street Address:**
Signature:	
Telephone: **FAX:** **E-Mail:**	**Mailing Address:**
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/Date	**California Prison Industry Authority Sales Manager or designee:** ☐ Approved ☐ Denied _____ Signature/Date

Submit completed form to: CDCR
Departmental, Procurement & Contracting Officer
Office of Business Services
By Fax: (916) 255-6185