Name of Supplier requested for this purchase: Estimated \$ amount of this purchase: Order Delivery Location: Supporting documentation (include supplier quotation, listing of books, ISBN#, title, author, etc.) must be attached to this form. Incomplete waiver requests are subject to be rejected. FAX ALL WAIVER REQUESTS TO: The Department of Procurement & Contracts (773) 553-2302 or 553-225 Attention: Lee Saulter, Commodity Manager/Education Signature of individual requesting waiver: TO BE COMPLETED BY DEPARTMENT OF PROCUREMENT AND CONTRACTS STAFF Date: Commodity Manager: Telephone # Waiver Request Approved Signature: Documentation Required (*) Waiver Request Denied Incomplete(*) Documentation Required (*)		STRATEGIC SOURCING WAIVER REQUEST			
Contact Name:	Date:	Commo	odity Type: Library Books (non Textbo	oks)	
A waiver is requested to make a purchase from a non-strategically sourced book supplier for the following reason(s): Name of Supplier requested for this purchase: Estimated \$ amount of this purchase: Order Delivery Location: Supporting documentation (include supplier quotation, listing of books, ISBN#, title, author, etc.) must be attached to this form. Incomplete waiver requests are subject to be rejected. [FAX ALL WAIVER REQUESTS TO: The Department of Procurement & Contracts (773) 553-2302 or 553-225 Attention: Lee Saulter, Commodity Manager/Education Signature of individual requesting waiver: TO BE COMPLETED BY DEPARTMENT OF PROCUREMENT AND CONTRACTS STAFF Date: Commodity Manager: Telephone # Waiver Request Approved Signature: Waiver Request Denied Incomplete(*) Documentation Required (*) Waiver Request Denied Incomplete(*) Documentation Required (*)	School/Department	Name:			
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TO BE COMPLETED BY DEPARTMENT OF PROCUREMENT AND CONTRACTS STAFF Date: Commodity Manager: Telephone # Waiver Request Approved Signature: Waiver Request Denied Incomplete(*) Documentation Required (*)		O	• •		
TO BE COMPLETED BY DEPARTMENT OF PROCUREMENT AND CONTRACTS STAFF Date: Commodity Manager: Telephone # Waiver Request Approved Signature: Waiver Request Denied Incomplete(*) Documentation Required (*)	Signature of individ	dual requesting waiver:			
Waiver Request Approved Signature: Waiver Request Denied Incomplete(*) Documentation Required (*)			UREMENT AND CONTRACTS STAFF		
Waiver Request Denied Incomplete(*) Documentation Required (*)	Date:	Commodity Manager:	Telephone #		
	Waiver Request Ap	proved Signature:		_	
/*\ May be resultainted for review with the required documents to the Department of Procurement and Contracts	Waiver Request D	Denied Incomplete(*)	Documentation Required (*)		
(*) May be resubmitted for review with the required documents to the Department of Procurement and Contracts					
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