

General State Agency Exemption Request Form

Use this form to request a purchase exemption for CALPIA products and/or services. This form does not apply to California Department of Corrections (CDCR) facilities or Modular Systems Furniture orders. CALPIA exemption letters must be maintained in the department's purchasing file as proof of exemption approval.

All **highlighted** information must be provided to complete your request.

Agency:			
Department Contact Information			
Contact Name:		Street Address:	
Telephone:		Mailing Address:	
FAX:			
E-Mail:			
Vendor Information			
Vendor Name:			
Vendor Address:			
Purchase Order Total:	Purchase Order Number:	Quantity for Each Line Item Requested:	Requested Delivery Date:
Provide a description of items requested in the exemption request including all goods and/or services the contractor will provide: (Attach additional information if necessary (i.e. catalog photocopy))			
Justification for Exemption Request: (To expedite your request, please provide a detailed explanation of the reason for your request.) *Medical exemptions require the CALPIA Medical Authorization Form to be attached.			
Required Approvals			
Procurement and Contracting Officer (PCO) or designee:		California Prison Industry Authority Sales Manager or Designee:	
_____		Approved Denied	
Printed Name/Title		_____	
_____		Signature/Date	
Signature/Date			

Note: CDCR Customers
Please use form SAL-F010

Remit completed form to: California Prison Industry Authority
Sales Branch
2125 19th Street
Sacramento CA 95814
salesinfo@calpia.ca.gov

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