

Expiration Date: _

MR# 23-295
Assigned by Purchasing Div.

MODIFICATION (WAIVER) REQUEST

Requesting Department & Division	Contac	ct Name	Telephone #		
Department Head Signature	Date	Original RQ#	Estimated Cost		
Patricia K Wahto		9748	\$		
Is this Procurement State or Federally funded?	YES	NO			

Reason for Modification Request:

	Please complete this form plete, accurate, detailed e				<i>C</i> .	
Sole Source: The purchase Code Provision: 53.50.090		ervice from the only	known sin	gle source. Atta	ch verifica	tion.
Class 2 Emergency: A Code Provision: 53.50.090		s a threat to the hea	lth, welfare	or safety of the	public.	
Rider to Another Conproposed purchase must me Code Provision: 53.50.090	et CBJ purchasing requir	rements and must h	ave been co			ng to CBJ. The
No Substitute: A reque must be available from mor		me and model num	ber of a par	rticular item to b	e purchase	ed. The item
Other: Clear explanation Explanation:	is required. Code Prov	ision: (if applicable)		_	
Approved By:						
		FY	RQ	\$ Amount	PO #	Purchasing Approval
Purchasing Officer	Date	-				
City Manager	Date					
Purchasing Officer Commen	ts:					