



STATE CONTRACT EXEMPTION REQUEST
 OFFICE OF MANAGEMENT AND BUDGET
 CENTRAL SERVICES - STATE PROCUREMENT OFFICE
 SFN 54202 (11-2016)

Agency Name		Business Unit Number	Request Date
Contact Person	Telephone Number	Fax Number	Email Address
State Contract Name		State Contract Number	
Purchase Type <input type="checkbox"/> One-Time Purchase <input type="checkbox"/> Recurring Purchase		Estimated Purchase Price	
Describe what you need to purchase and explain why the state contract cannot meet your needs. Identify the commodity, service and vendor you seek to use in lieu of the State Contract. You may be required to submit an Alternate Procurement or conduct a competitive process.			

Submit To: Procurement Work Request System at: <http://www.nd.gov/OMB> under "OMB Apps Login"

State Procurement Office
 14th Floor Capitol Tower
 600 East Boulevard - Dept 012
 Bismarck, ND 58505-0310

- or -

Email: infospo@nd.gov
 Fax: (701) 328-1615
 Telephone: (701) 328-2740

FOR USE BY OMB STATE PROCUREMENT OFFICE ONLY

Action Taken/Comments		
<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved		If Recurring, Expiration Date of Contract Exemption
State Procurement Office Representative	Signature	Date