

Professional Services Bid Exemption Approval Form for Services above \$10,000

Step 1. Complete Description of Service. Attach quote/proposal to be executed with this request and proposed vendor contract.

Name of Vendor			Description o	f Services	
***************************************					
CMSD Initiator Na	me	Department		Title	
Initiator Email:				-	
Contract/Proposa Term of Engagemo	l Amount: ent (Dates):				
	0. Include stateme			for Professional Services	
					<del>50</del>
					Militaria ang kandi Amerik (ing pan
Type of Service (C	heck One)				
_ Architectural	Legal Servi	ces	Consulting	3	
_ Financial	Creative D	esign	Planning		
_ Engineering	Medical				
Other (Please p	rovide explanatio	n)			

Print Name:		hidden Coppe (in 10 No. 24 A State 10 St
Deputy Chief		; or
Print Name:		november of the second of the
Chief:		
Print Name:		
Step 3. Submit this request with	n quote/proposal and vend	or contract to
Step 3. Submit this request with Purchasing Director for approva	• • •	or contract to
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