Exception Request GSA-Like Pricing

Procuring Agency:		Date:	
Requisition Numb	er:	·	
Good or Service T	Го Be Provided:		
GSA Contract Nur	mber:		
GSA Contract Term Length:		Through	
Type of Award Requested:			
Contract One Time			
Funding: (Indicate Percentage)			
Federal State	% %	Estimated Dollar Amount of Contract or Purchase Order:	\$
Attachments:			
1. Copy of	f GSA Contract		
2. Proof of Need (Requests		s > \$15,000,000.00)*	*Services Only
3. Pre-Agreement Outcome Tool (Requests > \$500,000.00)*			
By signing below, the procuring agency is certifying that the information on this page and on any accompanying material is complete and accurate to the best of the procuring agency's knowledge. The procuring agency is solely responsible for the information provided to the Materiel Division and understands and acknowledges that the Materiel Division will rely on this information to consider/process this request.			
Signature of Procuring Agency			
Title:			