**Request for exception to Document Policy**

This is a request is being made on behalf of Name of Company (Vendor) and is made and effective Date (the Effective Date) for exception to policy on minimum required documents.

1. Name of Document
   1. Vendor Name. is requesting an exception due to Reason for Request for Exception.

NYAB CM only - Approve  Disapprove

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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IN WITNESS WHEREOF, the Parties have agreed to this Exception to Document Policy as of the Effective Date.

Signed: Signed:

Requestor of Change Name Commodity Manager Name

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: Name Print Name: Name.

Title: Title. Title: Title.

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Approved  Disapproved

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Add Full Name (Director of Purchasing or VPs only

Add Title (Director of Purchasing or VPs only