



Office Use Only	
Date Requested	_____
Received by	_____
LA approved	<input type="checkbox"/> Y <input type="checkbox"/> N
ITCA approved	<input type="checkbox"/> Y <input type="checkbox"/> N
Exception begins	_____

Exception to the Minimum Stock Requirements
(SUBMIT THIS FORM 2 WEEKS PRIOR TO CHANGE)

VENDOR REQUEST

Vendor Name/Number: _____ Vendor ID Number _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Fax Number: _____

Effective Date: _____

Type of Request: _____

Reason for Request: _____

Vendor Signature: _____ Date: _____

ITCA Approval Signature: _____ Date: _____

NOTE: ITCA may provide an exception from the minimum stocking requirements under special circumstances. The exception may be revoked by ITCA at any time. (Vendor Contract IV.2.c and Vendor Manual page 61)