Emergency Justification Form

Requisition	#: <u>DC-41</u>	Date:	10/2/2014		Amount: \$ <u>75.00</u>	
Departmen	t: Detention	Center Vendo	r: <u>Geroge's Appli</u>	ance Repair	EMG: <u>FY1415-022</u>	
processing		cy requisition	of products and/or		iding information necessary in the applete and forward to the Finance	
Dep	artmental Res	sponsibilities:	CII	EI O		
1.	State the reas		ergency purchase l	by explaining what the	e emergency is and/or what caused the	
<u>Fac</u>	ility dryer bed	came inopera	ble. Cause of situ	uation was normal w	vear and tear.	
2.	 State the financial or operational damage/risk that will occur if needs are not satisfied immediately (do not simply say there will be a loss or some damage): 					
	ility launderir ments clean.	ng services m	ust be fully opera	ational at all times to	keep inmates clothing and kitchen	
	purchased foll	l <mark>owing s</mark> tandar	d procedures:	anticipated so that go	ods/services could not have been	
if applicable):			d responds to the fac	es/proposals received from other sources, cility immediately.	
			ue and correct, and an emergency pro		al fact or consideration offered or given	
Submitted b	y:	Carolina Pa	2/2/2	3000		
	s/				10/1/2014	
Elected Offi	cial/Departme	nt Supervisor		Date		
/s					10/1/2014	
County Mar		1	O_{F}	Date	NE N	
FINANCE DEPARTMENT USE ONLY:						
Approved B	y:F	/s/ inance Depart	ment	Date: _	10/2/2014	