

FLORIDA AGRICULTURAL AND MECHANICAL UNIVERSITY  
**Division of Research Purchase Exemption**

Requisition No.	Date	Name of Grant	Grant Number
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The following item(s) is/are necessary for the efficient or expeditious fulfillment of the \_\_\_\_\_ research project. Therefore, we recommend exemption from the general requirements under the provision of Section 1004.22, Florida Statutes and Florida A&M University Regulation 6.007 (1).

**Duration of Grant:**

**Description of Item(s):**

**Purpose:**

**Justification:**

**Certification:**

I, the undersigned, certify the above to be true and correct to the best of my knowledge and belief.

Signature \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_