Los Angeles Unified School District

INFORMATION TECHNOLOGY SERVICES

REQUEST FOR CLARIFICATION *(RFC)*

School Name: _____ **RFC Number:** _____

Project Name: _____ Location Code: _____

Project Description _____ Date: _____

Issued To: _____ Contract No.: _____

Author: _____ Reviewer: _____

_____ _____ _____

Drawing Number Detail | Specification Section | Page

Request (include sufficient detail to support request):

Request issued by _____ _____ _____

Contactor Signature | Name (Printed) | Date

Response:

Response Reviewed by:

_____ _____ _____

ITIPM Signature | *Name (Printed)* | *Date*

_____ _____ _____

Director | *Name (Printed)* | *Date*

This Form Cannot Modify Contract Amount or Milestones and/or Contract Time.