REFUND/REIMBURSEMENT (See Below for Instructions)

TO:

CHIEF, ACCOUNTS RECEIVABLE BRANCH (6BCR)

INSTRUCTIONS

Use this form whenever a refund is due a successful bidder, or a reimbursement is due to a State agency for transportation costs or to a Federal agency for exchange/sale from a previous register/deposit ticket.

Item No.								
1, 2, 4, 6 & 7	Enter each number as shown on the SASY generated Register of Remittances Received.							
3, 5a - 5d	Enter the bidder number, name, and complete address of the successful bidder for the cited contract number.							
8a - 8d	Enter the appropriate amount and check one reason for the refund. INCLUDE A COPY OF GSA FORM 27A.							
9a - 9b	Enter amount to be reimbursed to the State and appropriation/fund code or to the Federal agency and account number.							
10a - 10c	The Contracting Officer must review the complete form, then sign and date.							
11a - 11c	The Sales Manager must review the completed form, then sign and date.							
1. REGISTER NUMBER 2 CON			CONTRACT	ACT NUMBERS 3. BIDDER NU			R NUMBER	
	a .	2. (CONTRACT			1		
	a b					1		
	c			f		1		
4		OF PAYMENT	É	TI 5. SUCCESSFUL BIDDE	R'S NAME			
a. CASH		b. CREDIT CARD (Attach cop	ov of slip)					
DEPOSIT TICKET NO.		DATE		5a. SUCCESSFUL BIDDI	ER'S STREET ADDF	RESS		
6. SALE NUMBER	7.	LOT NUMBER(S)	Ę	5b. CITY			5c. STATE	5d. ZIP CODE
		8. REFUND) (Attacl	n copy of GSA For	rm 27A)			ı
a. FULL AMOUNT (Retain) (80% (Retain 20% Liq. Damage	s) OR	d. REASON (Check one)	ı			
\$25				PROPERTY NOT AVAILABLE				
c. IF OTHER THAN a OR b, EXPLAIN				MISDRESCRIPTION				
				BIDDER IN DEFAULT				
				OTHER (Explain):				
					, .			
			9. REIN	MBURSEMENT				
a. STATE AGENCY				b. FEDERAL AGENCY				
(1) TRANSPORTATION COSTS (\$)			((1) EXCHANGE/SALE(\$) (2) REIMBURSABLE (\$)				
(2) APPROPRIATION CODE/FUND			((3) ACCOUNT NUMBER				
10a. SIGNATURE OF CONTRACTING OFFICER				10b. CONTRACTING OFFICER'S NAME (Print)			1	Oc. DATE
11a CIGNATURE OF CALE	MANAGER			11h CALEC MANACED	C NAME /Print			I. DATE
11a. SIGNATURE OF SALES MANAGER				11b. SALES MANAGER'S NAME (Print)				I1c. DATE