

<b>SUPPLIES/EQUIPMENT/SERVICES REQUISITION</b>			FOR USE OF OFFICE OF ADMINISTRATIVE SERVICES	
			P.O Number	Requisition No.
TO: (Check appropriate box. See reverse side of last copy of this form for services provided by each office and instructions for preparation)				
<input type="checkbox"/>	CONSOLIDATED PROPERTY & SERVICES DIVISION (M/AS/CPD), (Clearance, Printing Graphics & Supply Processing)			
<input type="checkbox"/>	AUTOMATION SUPPORT (M/IRM/TCO), (Clearance on ADP Procurement)			
<input type="checkbox"/>	ADMINSTRATIVE PURCHASING DIVISION (M/AS/AP), (Final Order Processing)			
AUTHORIZING OFFICIAL			Date Issued	Date Required
Typed Name		Title	Signature	
ITEM No.	DESCRIPTION OF MATERIAL OR SERVICES REQUIRED		QUAN TITY	UNIT
				FOR M/AS USE
	JUSTIFICATION:			
	PRIORITY: <input type="checkbox"/> ROUTINE (20 DAYS) <input type="checkbox"/> URGENT (5 DAYS)			
	ADDITIONAL JUSTIFICATION IF URGENT:			
DELIVER TO			FUNDING INFORMATION	
Name		Room Number	Phone Number	Allotment
Division		Branch		Appropriation
Received By			Date	Obligation