USDA Form RD 1955-62 (1-97)		1. REQUEST NUMBER			
(. J.)		a. County/District			
RFQI	IEST FOR CONTRACT SERVICES	b. State Office			
11200		2. ESTIMATED AMOUNT (OF		
cus	TODIAL / INVENTORY PROPERTY	PROPOSED CONTRAC	T	\$	
	PROGRAM SERVICES	3. DATE ITEM NEEDED		Expedite, work in progress Public Emergency	
4. ACCOUNTING	DATA	5. DESCRIPTION OF WOR	RK REQUEST	FD	
		O. DECORM MOREON WON	W NE GOLOT		
a. FY 20	Agriculture Credit Insurance Fund				
	Rural Housing insurance Fund				
	Rural Development Insurance Fund				
	☐ Salary and Expense				
	Other:				
b. Item is for	☐ Inventory Property				
	Other.				
a Chargos ara	□ Beenvershie				
c. Charges are					
	Non-recoverable				
d. Case No	Advice No				
6. ATTACHED ITE	MS ("X" as applicable)				
☐ Proposed S	tatement of Work or Existing Contract	Spread Shoot for Multipl	o Proportios		
☐ Wage-Rate	Determination/Decision				
= -					
		Other			
		ble for current program use b	out suitable for		
b. Economic Fa	actors				
c. Comments an	d Additional Information				
8. PROPOSED C	ONTRACTING ASSISTANTS (Name, title, mailing addres	s and telephone number)			
	, , , , , , , , , , , , , , , , , , , ,	, ,			
☐ COR					
☐ COTR					
☐ INSPECTO	DR .				
9. INITIATOR IDE	ENTIFICATION				
REQUEST FOR CONTRACT SERVICES FOR CUSTODIAL / INVENTORY PROPERTY OR PROGRAM SERVICES 4. ACCOUNTING DATA a. FY 20					
	,				
h Signature			Date		
b. Signature			Date		

10. APPROVALS			
SIGNATURE (No initials)	DATE	SIGNATURE (No initials)	DATE
a. RD State Director or Program Chief/FSA State Executive Director or Ag Credit Director		d. RD Assistant Administrator/FSA Deputy Administrator (If amount is over \$25, 000)	
b. National Office Program Director		e. RD Assistant Deputy Administrator/Administrator FSA Associate Administrator/Administrator (If amount is over \$50,000)	
c. Director, Budget Staff (If funded by other than insurance fund)		f. Director, Regulations and Paperwork Management Division	

CONTINUATION: