

LOGISTICS DIVISION

OPERATIONS BRANCH SPECIAL ORDER REQUEST FORM

INSTRUCTIONS: Please complete the form below to request a special order. Once complete, please click the e-mail button below to send your request to the Logistics Division. You will be contacted with further instructions.

Requestor / Representative	Department		Extension		Date		Office / Cubicle
Item Description	Product # / NSN	Distribi	utor	Quanity	Unit Price	Supervisor Initials if quanity > 20	Total
1.							
2.							
3.							
4.							
5.							
						Total Co	st

Please click the 'E-mail' button to forward your request to the Logistics Division as an e-mail attachment. You may wish to save this document locally to be reused at a later date and time or as a record of request.

PLEASE ALLOW 5 BUSINESS DAYS FOR US TO PROCESS YOUR SPECIAL ORDER REQUEST.

DFFICIAL USE ONLY	
Approved Disapproved	Russ Roberts, Logistics Division Chief
Comments	