

# REQUEST FOR SUPPLIES AND SERVICES

For use of this form, see G4 Standard Operating Procedures (SOP), Proponent agency is ATCC-LMA

1. ACTIVITY		2. UIC	3. REQUEST DATE	4. DATE REQUIRED
<input type="text"/>		<input type="text"/>	<input type="text"/>	
5. LOCAL PURCHASE AUTHORITY	6. PR NUMBER (G4 ONLY)	7. QUANTITY	8. UNIT OF ISSUE	9. UNIT PRICE
10. TOTAL COST				
11A. DESCRIPTION OF SUPPLIES OR SERVICES and PERIOD OF PERFORMANCE (PoP)				
11B. AMO NUMBER		12. MANDATORY SOURCE USED <input type="checkbox"/> Yes <input type="checkbox"/> No		13. SONA <input type="checkbox"/> Yes <input type="checkbox"/> No
14. IT PURCHASE <input type="checkbox"/> Yes <input type="checkbox"/> No		15. ITAS WAIVER REQUIRED <input type="checkbox"/> Yes <input type="checkbox"/> No		
16. RECOMMENDED SOURCE		17. SHIP TO LOCATION AND POC		
16A. RECOMMENDED SOURCE FINANCE POC				
16B. UEI		CAGE		
18. REQUIREMENT POINT OF CONTACT AND PHONE NUMBER		19. COMMANDER OR DIRECTOR APPROVAL (SIGNATURE)		
20. SJA APPROVAL (SIGNATURE)		21. PBO APPROVAL (SIGNATURE) ARC CODE X D N		
22. G4 APPROVAL (SIGNATURE)		23. G6 APPROVAL SIGNATURE (IT ONLY) Yes No		
24. FUND CITE (G8 ONLY)		25. BUDGET ANALYST (G8 ONLY)		
26. ADDITIONAL APPROVAL (SIGNATURE)		27. ADDITIONAL APPROVAL (SIGNATURE)		

REQUEST FOR SUPPLIES AND SERVICES (Continuation Sheet)

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11C. DESCRIPTION OF SUPPLIES OR SERVICES CONTINUED

## INSTRUCTIONS FOR REQUEST FOR SUPPLIES AND SERVICES

For use of this form, see G4 Standard Operating Procedures (SOP)

1. **Activity (Organization / Directorate / Section):** Full name of location, i.e., USACC G4/8 Fort Knox.
2. **Unit Identification Code (UIC):** Insert UIC here.
3. **Request Date:** Insert request date here. Field is a date drop down.
4. **Date Required:** Date product or service needed by. Field is a date drop down.
5. **Local Purchase Authority:** Regulation, CTA, TDA that authorizes the purchase.
6. **Purchase Requisition (PR) #:** Insert PR # here (provided by G4, G8 or Brigade Resource Manager).
7. **Quantity:** Insert the number of each item requested (If not indicated in block 11)
8. **Unit of Issue:** (Each (EA), Set (ST), Package (PK), etc.) (If not indicated in block 11)
9. **Unit Price:** Insert cost of each item (If not indicated in block 11)
10. **Total Price:** Total cost of requirement.
11. **11A. Description of Supplies or Services and Period of Performance (PoP) Date:** Provide detailed description of requested supplies or services. If service, include the PoP date. Include requirement/event request supports, date(s) of requirement/event and complete list of supplies or services being requested. Description must include service/nomenclature requested. Description must be broken down by funding type (OMA, MPA, UPL, etc.)
- 11B. **Acquisition Management Oversight Number (AMO #) (G4 use only):** Insert AMO #.
12. **Mandatory Source Used:** Answer Yes/No.
13. **Statement of Non-Availability (SONA):** Answer Yes/No. Required for mandatory sources (CHES, DLA, Heraldry, etc.). G4 and G6 can assist with providing mandatory sources.
14. **Information Technology (IT) Purchase:** Answer Yes/No.
15. **Information Technology Approval System (ITAS) Waiver Required (IT only):** Answer Yes/No and ITAS number. Provided by G6.
16. **Recommended Source:** Enter name and address of recommended source technical point of contact with phone number/email (POC providing supplies/services)
- 16A. **Recommended Source Finance POC:** Enter phone number and email (required for MIPR and Direct Charge WBS).
- 16B. **Unique Entity ID (UEI) and CAGE:** Located on System for Award Management (SAM).
17. **Ship to Location:** Indicate where the product will be shipped to or where the service will be performed. If multiple locations insert "See attached delivery locations spreadsheet".
18. **Requirement Point of Contact and Phone number.**
19. **Commander or Director Approval Signature.**
20. **Staff Judge Advocate (SJA) Approval Signature.**
21. **Property Book Office (PBO) Approval Signature and ARC CODE:** Required for purchase of accountable items.
22. **G4 Simplified Acquisition Threshold Supply Procurement Program (S2P2) Approval Signature.**
23. **G6 Approval Signature:** IT equipment
24. **Fund Cite:** Budget analyst (G8) must approve a line of accounting.
25. **Budget Analyst (G8) Signature:** Budget analyst must sign and date.
26. **Additional Approval Signature (if required)**
27. **Additional Approval Signature (if required)**

### CONTINUATION SHEET

**11C. DESCRIPTION OF SUPPLIES OR SERVICES \*\*Add additional data (if applicable)**