



TO: Supply Officer		REQUESTING OFFICE			TO BE COMPLETED BY SUPPLY PERSONNEL (NOTE: Alterations in "ACTION" column will be initialed and dated.)		
ACTION REQUESTED DELIVERY TURN-IN		DATE PREPARED	DATE REQUIRED				

ITEM NO. OR STOCK NO. <i>(If available)</i>	DESCRIPTION	QUAN- TITY	UNIT	ESTIMATED UNIT COST	UNIT COST	TOTAL COST	ACTION <i>(Note 1)</i>

JUSTIFICATION OF NEED OR TURN-IN <i>(If recurring need, indicate 30 day estimate. If turn-in, do not use this form if circumstances require use of VA Form 1217, Report of Survey.)</i>	FOB	
	TERMS	DELIVERY DATE
	QUOTE DATE	BY (Initials)

SIGNATURE OF INITIATOR	SIGNATURE OF APPROVING OFFICIAL	DATE
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ADMINISTRATIVE ACTION	RECEIPT ACTION
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<i>(CHECK APPLICABLE BOX)</i> UNPOSTED POSTED SERVICE BULK SALE	I CERTIFY that the quantities in "ACTION" column have been received.
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AVAILABILITY OF ITEMS REQUESTED ABOVE, OR SUITABLE SUBSTITUTES NOT AVAILABLE FROM ANY OF THESE VA STOCK GSA STOCK EXCESS	SIGNATURE OF RESPONSIBLE OFFICIAL OR DESIGNEE	DATE
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SIGNATURE OF ACCOUNTABLE OFFICER OR DESIGNEE	DATE	<i>(CHECK APPLICABLE BOXES)</i> TURN IN USE ONLY - I CERTIFY that the quantities shown in "ACTION" column have been received and the turn-in circumstances cited appear reasonable. Disposition codes indicate action taken.
AUTHORITY FOR AND/OR METHOD OF PURCHASE		

I CERTIFY that the resultant contract is authorized by law and is within the limits of my authority.	RECEIVING REPORT USE ONLY - The articles or services listed herein have been received or rendered and are accepted, except as noted.
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SIGNATURE OF CONTRACTING OFFICER	SIGNATURE OF STOREKEEPER	DATE
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PURCHASE ORDER OR REQ. NO.	DATE OF P.O. OR REQUISITION	SIGNATURE OF ACCOUNTABLE OFFICER	DATE
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FUND CERTIFICATION: The supplies/services listed on this request are properly chargeable to the following allotments, the available balances of which are sufficient to cover the cost thereof, and funds have been obligated.	DATE OF VOUCHER	VOUCHER NUMBER
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APPROPRIATION AND ACCOUNTING SYMBOLS	OBLIGATED BY	DATE
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