

## DD Form 577 Appointment/Termination Record-Authorized Signature .... continued

| 18. KSD: DD Form 577 Appointment/Termination Record-Authorized Signature  | Yes | No | N/A | Comments |
|---|-----|----|-----|----------|
| P18. Did the Appointee print their name in the Appointment Acknowledge section?   |     |    |     |          |
| Q6. If applicable, is the Order Number provided?  |     |    |     |          |
| R18. Was the date recorded upon the termination of the appointment?   |     |    |     |          |
| S18. Did the Appointee record his initials on the Appointment/Termination Record upon the termination of the appointment?               |     |    |     |          |
| T18. Did the Appointing Authority print their name on the Appointment/Termination Record upon the termination of the appointment?       |     |    |     |          |
| U18. Did the Appointing Authority record their title on the Appointment/Termination Record upon the termination of the appointment?     |     |    |     |          |
| V18. Did the Appointing Authority record their signature on the Appointment/Termination Record upon the termination of the appointment? |     |    |     |          |

**Preparer**

Title: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Reviewer**

Title: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Example: DD Form 577 Appointment/Termination Record-Authorized Signature

| <b>APPOINTMENT/TERMINATION RECORD - AUTHORIZED SIGNATURE</b><br><i>(Read Privacy Act Statement and Instructions before completing form.)</i>  |  |  |
|---|--|--|
| <b>PRIVACY ACT STATEMENT</b>  |  |  |
| <p><b>AUTHORITY:</b> E.O. 9397, 31 U.S.C. Sections 3325, 3526, DoDFMR, 7000.14-R, Vol. 5.</p> <p><b>PRINCIPAL PURPOSE(S):</b> To maintain a record of certifying and accountable officers' appointments, and termination of those appointments. The information will also be used for identification purposes associated with certification of documents and/or liability of public records and funds.</p> <p><b>ROUTINE USE(S):</b> The information on this form may be disclosed as generally permitted under 5 U.S.C Section 552a(b) of the Privacy Act of 1974, as amended. It may also be disclosed outside of the Department of Defense (DoD) to the the Federal Reserve banks to verify authority of the accountable individual to issue Treasury checks. In addition, other Federal, State and local government agencies, which have identified a need to know, may obtain this information for the purpose(s) identified in the DoD Blanket Routine Uses published in the Federal Register.</p> <p><b>DISCLOSURE:</b> Voluntary; however, failure to provide the requested information may preclude appointment.</p> |  |  |
| <b>SECTION I - FROM: APPOINTING AUTHORITY</b>   |  |  |
| 1. NAME (First, Middle Initial, Last)<br><span style="color: red; border: 1px solid red; border-radius: 50%; padding: 2px;">A18.</span>   | 2. TITLE<br><span style="color: red; border: 1px solid red; border-radius: 50%; padding: 2px;">B18.</span>                                     | 3. DOD COMPONENT/ORGANIZATION<br><span style="color: red; border: 1px solid red; border-radius: 50%; padding: 2px;">C18.</span>  |
| 4. DATE (YYYYMMDD)<br><span style="color: red; border: 1px solid red; border-radius: 50%; padding: 2px;">D18.</span>  | 5. SIGNATURE<br><span style="color: red; border: 1px solid red; border-radius: 50%; padding: 2px;">E18.</span>                                 |  |
| <b>SECTION II - TO: APPOINTEE</b>   |  |  |
| 6. NAME (First, Middle Initial, Last)<br><span style="color: red; border: 1px solid red; border-radius: 50%; padding: 2px;">F18.</span>   | 7. SSN<br><span style="color: red; border: 1px solid red; border-radius: 50%; padding: 2px;">G18.</span>                                       | 8. TITLE<br><span style="color: red; border: 1px solid red; border-radius: 50%; padding: 2px;">H18.</span>                       |
| 9. DOD COMPONENT/ORGANIZATION<br><span style="color: red; border: 1px solid red; border-radius: 50%; padding: 2px;">I18.</span>   |  | 10. ADDRESS (Include ZIP Code)<br><span style="color: red; border: 1px solid red; border-radius: 50%; padding: 2px;">J18.</span> |
| 11. TELEPHONE NUMBER (Include Area Code)<br><span style="color: red; border: 1px solid red; border-radius: 50%; padding: 2px;">K18.</span>  | 12. EFFECTIVE DATE OF APPOINTMENT (YYYYMMDD)<br><span style="color: red; border: 1px solid red; border-radius: 50%; padding: 2px;">L18.</span> |  |
| 13. POSITION TO WHICH APPOINTED (X as applicable (one only)) <span style="color: red; border: 1px solid red; border-radius: 50%; padding: 2px;">M18.</span><br><input type="checkbox"/> DISBURSING OFFICER <input type="checkbox"/> DEPUTY DISBURSING OFFICER <input type="checkbox"/> DISBURSING AGENT<br><input type="checkbox"/> PAYING AGENT <input type="checkbox"/> CASHIER <input type="checkbox"/> COLLECTION AGENT<br><input type="checkbox"/> CHANGE FUND CUSTODIAN <input type="checkbox"/> IMPREST FUND CASHIER <input type="checkbox"/> CERTIFYING OFFICER<br><input type="checkbox"/> DEPARTMENTAL ACCOUNTABLE OFFICIAL   |  |  |
| 14. YOU ARE HEREBY APPOINTED TO SERVE IN THE CAPACITY IDENTIFIED IN ITEM 13. YOUR RESPONSIBILITIES INCLUDE:<br><br><span style="color: red; border: 1px solid red; border-radius: 50%; padding: 2px;">N18.</span>   |  |  |
| 15. YOU ARE ADVISED TO REVIEW AND ADHERE TO THE FOLLOWING REGULATION(S) NEEDED TO ADEQUATELY PERFORM THE DUTIES TO WHICH YOU HAVE BEEN ASSIGNED:<br><br><span style="color: red; border: 1px solid red; border-radius: 50%; padding: 2px;">O18.</span>  |  |  |
| <b>SECTION III - ACKNOWLEDGEMENT OF APPOINTMENT</b>   |  |  |
| I acknowledge and accept the position and responsibilities defined above. I understand that I am strictly liable to the United States for all public funds under my control. I have been counseled on my pecuniary liability and have been given written operating instructions. I certify that my official signature is shown in item 17 below.  |  |  |
| 16. PRINTED NAME (First, Middle Initial, Last)<br><span style="color: red; border: 1px solid red; border-radius: 50%; padding: 2px;">P18.</span>  | 17. SIGNATURE<br><span style="color: red; border: 1px solid red; border-radius: 50%; padding: 2px;">Q18.</span>                                |  |
| <b>SECTION IV - TERMINATION OF APPOINTMENT</b>  |  |  |
| The appointment of the individual named above is hereby revoked.  |  | 18. DATE (YYYYMMDD)<br><span style="color: red; border: 1px solid red; border-radius: 50%; padding: 2px;">R18.</span>            |
|   |  | 19. APPOINTEE INITIALS<br><span style="color: red; border: 1px solid red; border-radius: 50%; padding: 2px;">S18.</span>         |
| 20. NAME OF APPOINTING AUTHORITY<br><span style="color: red; border: 1px solid red; border-radius: 50%; padding: 2px;">T18.</span>  | 21. TITLE<br><span style="color: red; border: 1px solid red; border-radius: 50%; padding: 2px;">U18.</span>                                    | 22. SIGNATURE<br><span style="color: red; border: 1px solid red; border-radius: 50%; padding: 2px;">V18.</span>                  |

DD FORM 577, FEB 2011

PREVIOUS EDITION IS OBSOLETE.

Adobe Professional 8.0

United States Marine Corps (USMC)  
Key Supporting Documentation (KSD) Checklist

Please check whether the following elements are adequately addressed in the Key Supporting Documentation (KSD) and make comments, if necessary.

## 11.19 - Physical Inventory Certificate of Results

| 19. KSD: Physical Inventory Certificate of Results  | Yes | No | N/A | Comments |
|---|-----|----|-----|----------|
| A13. Does certificate consist of current date?  |     |    |     |          |
| B13. Is the dollar value prior to inventory provided?   |     |    |     |          |
| C13. Is the net loss variance provided and accurately calculated?   |     |    |     |          |
| D13. Is the net gain variance provided and accurately calculated?   |     |    |     |          |
| E13. Has the percentage of administrative gains and losses been provided and accurately calculated?       |     |    |     |          |
| F13. Has an opinion been provided for gains and losses for which causative research was not conclusive?   |     |    |     |          |
| G13. Have corrective actions been identified that are appropriate based on results of causative research? |     |    |     |          |
| H13. Does the certification contain the signature of the supply officer?                                  |     |    |     |          |

**Preparer**                      Title: \_\_\_\_\_  
    Printed Name: \_\_\_\_\_  
    Signature: \_\_\_\_\_                      Date: \_\_\_\_\_

**Reviewer**                      Title: \_\_\_\_\_  
    Printed Name: \_\_\_\_\_  
    Signature: \_\_\_\_\_                      Date: \_\_\_\_\_

## Example: Physical Inventory Certificate of Results



UNITED STATES MARINE CORPS  
(Oral Letterhead)

In reply refer to:

4400  
(code)  
(Date)

A13

From: (Supply Officer)  
To: Commanding Officer/Accountable Officer  
Subj: ANNUAL PHYSICAL INVENTORY RESULTS/CERTIFICATION  
Ref: (a) MCO P4400.150E  
(b) DEMR 7000.14-R  
(c) DoDI 5000.64

Encl: (1) Listing of inventory gains and losses

1. Per the references, a physical inventory of all military property and accountable materiel within the command was completed on (Date). Causative research has been conducted for all inventory variances, and all approved adjustment transactions for inventory gains and losses have been inducted to adjust the accountable property records. The results of the annual physical inventory are provided here for certification.

a. Dollar value of the account prior to the inventory  
\$ \_\_\_\_\_ B13

b. Net loss variance (total dollar amount of all inventory losses divided by the total value of the account) \_\_\_\_\_ % C13

c. Net gain variance (total dollar amount of all inventory gains divided by the total value of the account) \_\_\_\_\_ % D13

d. After conducting causative research on all inventory gains and losses, it has been determined that \_\_\_\_\_ % of the variances are due to administrative errors. E13

e. The following opinions are provided as to the cause of variances for which causative research was non-conclusive:

(1) (State opinions, if any) F13

Subj: ANNUAL PHYSICAL INVENTORY RESULTS/CERTIFICATION

f. In order to reduce future variances, the following corrective actions will be initiated:

(1) (State corrective actions) G13

(SUPPLY OFFICER) H13

United States Marine Corps (USMC)  
Key Supporting Documentation (KSD) Checklist

Please check whether the following elements are adequately addressed in the Key Supporting Documentation (KSD) and make comments, if necessary.

## 11.20 - Annual Physical Inventory Results

| 20. Annual Physical Inventory Results   | Yes | No | N/A | Comments |
|---|-----|----|-----|----------|
| A14. Has the AAC and unit roll up UIC been provided ?   |     |    |     |          |
| B14. Is the date of inventory completion provided?  |     |    |     |          |
| C14. Is the dollar value prior to inventory provided?   |     |    |     |          |
| D14. Has the specific gain/loss item been identified by listing the TAMCN, NSN, Nomenclature and Document Number?       |     |    |     |          |
| E14. Has the type of adjustment (gain/loss) been properly identified by the DIC Code?                                   |     |    |     |          |
| F14. Have the reported quantity, quantity per inventory, and discrepancy (gain/loss) been accurately identified?        |     |    |     |          |
| G14. Have the unit price and extended price of the individual items gained or lost been provided/accurately calculated? |     |    |     |          |

**Preparer**                      Title: \_\_\_\_\_  
 Printed Name: \_\_\_\_\_  
 Signature: \_\_\_\_\_                      Date: \_\_\_\_\_

**Reviewer**                      Title: \_\_\_\_\_  
 Printed Name: \_\_\_\_\_  
 Signature: \_\_\_\_\_                      Date: \_\_\_\_\_



Example: Annual Physical Inventory Results/Spreadsheet

| ANNUAL PHYSICAL INVENTORY RESULTS (GAINS AND LOSSES)   |     |              |                 |              |                  |         |                       |            |                |
|--|-----|--------------|-----------------|--------------|------------------|---------|-----------------------|------------|----------------|
| AAC:   |     |              |                 |              |                  |         |                       |            |                |
| UNIT ROLLUP UIC: A14                                   |     |              |                 |              |                  |         |                       |            |                |
| DATE OF INVENTORY COMPLETION: B14                      |     |              |                 |              |                  |         |                       |            |                |
| TOTAL VALUE OF THE ACCOUNT PRIOR TO THE INVENTORY: C14 |     |              |                 |              |                  |         |                       |            |                |
| INVENTORY GAINS/LOSSES                                 |     |              |                 |              |                  |         |                       |            |                |
| D14  | D14 | D14          | D14             | E14          | ACCT BAL/ RPT OH | INV QTY | DISCREPANT QTY (GAIN) | G14        | G14            |
| TAMCN  | NSN | NOMENCLATURE | DOCUMENT NUMBER | DIC/ADJ TYPE |                  |         |                       | UNIT PRICE | EXTENDED PRICE |
|  |     |              | example         | D&A          | 20               | 22      | 2                     | \$5.00     | \$10.00        |
|  |     |              |                 |              |                  |         |                       |            | \$0.00         |
|  |     |              |                 |              | F14              | F14     | F14                   |            | \$0.00         |
|  |     |              |                 |              |                  |         |                       |            | \$0.00         |
|  |     |              |                 |              |                  |         |                       |            | \$0.00         |
| TOTAL VALUE OF INVENTORY GAINS/LOSSES                  |     |              |                 |              |                  |         |                       |            | \$10.00        |

United States Marine Corps (USMC)  
Key Supporting Documentation (KSD) Checklist

Please check whether the following elements are adequately addressed in the Key Supporting Documentation (KSD) and make comments, if necessary.

## 11.21 - Commander's Annual Physical Inventory Certification

| 21. Commander's Annual Physical Inventory Certification  | Yes | No | N/A | Comments |
|--|-----|----|-----|----------|
| A15. Does certification consist of current date?   |     |    |     |          |
| B15. Has the date of inventory completion been identified?   |     |    |     |          |
| C15. Does the certification state that all discrepancies have been reviewed and gain and loss transactions have been approved?               |     |    |     |          |
| D15. Does the certification state that the commander has reviewed internal controls and directed appropriate corrective actions to be taken? |     |    |     |          |
| E15. Does the certification state that the inventory results and endorsement will be maintained for two years?                               |     |    |     |          |
| F15. Does the certification contain the signature of the Commander?  |     |    |     |          |

**Preparer**                      Title: \_\_\_\_\_  
 Printed Name: \_\_\_\_\_  
 Signature: \_\_\_\_\_                      Date: \_\_\_\_\_

**Reviewer**                      Title: \_\_\_\_\_  
 Printed Name: \_\_\_\_\_  
 Signature: \_\_\_\_\_                      Date: \_\_\_\_\_

Example: Commander's Annual Physical Inventory Certification



UNITED STATES MARINE CORPS  
(Oral Letterhead)

In reply refer to:

4400  
CO  
(Date) **A15**

FIRST ENDORSEMENT on SupO ltr 4400 Sup of (date)

From: Commanding Officer/Accountable Officer  
To: Supply Officer

Subj: ANNUAL PHYSICAL INVENTORY RESULTS/CERTIFICATION

1. I certify that I have reviewed the results of this command's Annual Physical Inventory of all Military Property and accountable materiel which was completed on (date): I have reviewed all inventory discrepancies and have approved all validated gain and loss transactions required to adjust the accountable property records. I have also reviewed current internal control procedures and have directed that appropriate corrective actions be taken to reduce inventory variances in the future.

**B15**

**C15**

**D15**

2. A copy of the inventory results and this endorsement will be maintained in the retention files for two years.

**E15**

(COMMANDER/ACCOUNTABLE OFFICER)

**F15**



United States Marine Corps (USMC)  
Key Supporting Documentation (KSD) Checklist

Please check whether the following elements are adequately addressed in the Key Supporting Documentation (KSD) and make comments, if necessary.

## 11.22 - NAVMC 11869: Notice of Delegation of Authority

| 22. KSD: NAVMC 11869: Notice of Delegation of Authority   | Yes | No | N/A | Comments |
|---|-----|----|-----|----------|
| A16. Does the notice contain the current date?  |     |    |     |          |
| B16. Has the name of the unit and the installation where the unit is located been identified?   |     |    |     |          |
| C16. Has the need to request, receive and turn in supplies been complete as yes or no for each authorized representative listed?                  |     |    |     |          |
| D16. Has the signature and initials been provided for each authorized representative listed?  |     |    |     |          |
| E16. Has the appropriate box "Delegates to" or "Withdraws from" been checked and the specific class of supplies been identified?                  |     |    |     |          |
| F16. Has the UIC and DoDAAC been identified?  |     |    |     |          |
| G16. Has the responsible officer been identified along with his rank/grade and telephone no. and has the expiration date of card been identified? |     |    |     |          |
| H16. Does the certification contain the signature of the responsible officer?   |     |    |     |          |

**Preparer**                      Title: \_\_\_\_\_  
    Printed Name: \_\_\_\_\_  
    Signature: \_\_\_\_\_                      Date: \_\_\_\_\_

**Reviewer**                      Title: \_\_\_\_\_  
    Printed Name: \_\_\_\_\_  
    Signature: \_\_\_\_\_                      Date: \_\_\_\_\_

### Example: NAVMC 11869: Notice of Delegation of Authority

**NAVMC 11869 (11-12) (EF)**  
 FOUO - Privacy sensitive when filled in. Print Form

**NOTICE OF DELEGATION OF AUTHORITY**  
 Purpose: To identify delegated individuals with the authority to request, receipt, or turn-in supplies on behalf of the appointed Responsible Officer in accordance with MCO 4400.150F.

**AUTHORIZED REPRESENTATIVE(S)**

|                                    |  |             |        |            |                           |
|------------------------------------|--|-------------|--------|------------|---------------------------|
| 2. ORGANIZATION RECEIVING SUPPLIES |  | 3. LOCATION |        | DATE:      |                           |
| 4. LAST NAME, FIRST NAME, MI       |  | AUTHORITY   |        |            | 8. SIGNATURE AND INITIALS |
|                                    |  | 5. REQ      | 6. REC | 7. TURN IN |                           |
|                                    |  |             |        |            |                           |
|                                    |  |             |        |            |                           |

**AUTHORIZATIONS BY RESPONSIBLE OFFICER, SUPPLY OFFICER, OR ACCOUNTABLE OFFICER**

9. THE UNDERSIGNED HEREBY  DELEGATES TO  WITHDRAWS FROM THE PERSON(S) LISTED ABOVE

THE AUTHORITY TO:

10. REMARKS

**I ASSUME FULL RESPONSIBILITY**

|                               |           |                             |                     |  |  |
|-------------------------------|-----------|-----------------------------|---------------------|--|--|
| 11. UNIT IDENTIFICATION CODE  |           | 12. DODAAC / ACCOUNT NUMBER |                     |  |  |
|                               |           |                             |                     |  |  |
| 13. LAST NAME, FIRST NAME, MI | 14. GRADE | 15. PHONE NUMBER            | 16. EXPIRATION DATE |  |  |
|                               |           |                             |                     |  |  |

17. SIGNATURE

B16

A16

D16

C16

E16

F16

G16

H16

United States Marine Corps (USMC)  
Key Supporting Documentation (KSD) Checklist

Please check whether the following elements are adequately addressed in the Key Supporting Documentation (KSD) and make comments, if necessary.

## 11.23 - WAWF Receiving/Acceptance Report

| 18. KSD: WAWF Receiving/Acceptance Report   | Yes | No | N/A | Comments |
|---|-----|----|-----|----------|
| A22. Is the Contract number recorded on the report and does it agree to the SF26 contract number? |     |    |     |          |
| B22. Is the Issue Date recorded on the report?  |     |    |     |          |
| C22. Is the shipment number and shipment date recorded on the report?                             |     |    |     |          |
| D22. Is the Freight on Board type (Shipping Point or Destination) recorded on the report?         |     |    |     |          |
| E22. Is the dollar amount/total dollar amount recorded on the report?                             |     |    |     |          |
| F22. Is the Prime Contractor information including Cage Code and Name recorded on the report?     |     |    |     |          |
| G22. Is the Ship To information including DODAAC and Name recorded on the report?                 |     |    |     |          |
| H22. Is the Administered By information including Code and Name recorded on the report?           |     |    |     |          |
| I22. Is the Payment Official information including DODAAC and Name recorded on the report?        |     |    |     |          |
| J22. Is the Stock Number and Stock Type recorded on the report?                                   |     |    |     |          |
| K22. Is the Quantity Shipped recorded on the report?  |     |    |     |          |
| L22. Is the item Description recorded on the report?  |     |    |     |          |
| M22. Is the Initiator information including Name, Phone Number and Email recorded on the report?  |     |    |     |          |
| N22. Is the Initiator Date of Action and Action recorded on the report?                           |     |    |     |          |
| O22. Is the Acceptor information including Name, Phone Number and Email recorded on the report?   |     |    |     |          |
| P22. Is the Acceptor Date of Action and Action recorded on the report?                            |     |    |     |          |

WAWF Receiving/Acceptance Report ... continued

**Preparer**                      Title: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Signature: \_\_\_\_\_                      Date: \_\_\_\_\_

**Reviewer**                      Title: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Signature: \_\_\_\_\_                      Date: \_\_\_\_\_

## Example: WAWF Receiving/Acceptance Report

page 1

| <b>RECEIVING REPORT</b>   |  |                 |                |  |                  |  |             |
|---|--|-----------------|----------------|--|------------------|--|-------------|
| (Please look in WAWF for signed copy)   |  |                 |                |  |                  |  |             |
| Contract Number   |  | Delivery Order  |                | Issue Date   |                  | <input checked="" type="checkbox"/> Supplies<br><input checked="" type="checkbox"/> Services |             |
| W15QKN05C1173   |  | A22.            |                | B22.   |                  | 2005/03/22   |             |
| Shipment Number   |  | Shipment Date   | Final Shipment | Inspection Point   | Acceptance Point | Estimated Delivery Date  |             |
| C22. RDB0378  |  | C22. 2008/04/21 | N              | O  | O                |  |             |
| B/L Number  |  | TCN             |                | First Line Haul Mode   |                  | Gross Weight   | FOB         |
|   |  |                 |                |  |                  |  | S D22.      |
| Summary of Detail Level Information   |  |                 |                |  |                  | Total  | E22. \$0.00 |
| 1 CLIN/SLIN/ELIN(s)   |  |                 |                |  |                  |  |             |
| Routing Information   |  |                 |                |  |                  |  |             |
| F22. <b>Prime Contractor</b><br>CAGE Code: KB237<br>Name: BAE SYSTEMS LAND SYSTEMS (WEAPONS & VEHICLES) LTD<br>APF BUILDING C10 BAE SYSTEMS<br>BARROW-IN-FURNESS LA14 1AF GBR |  |                 |                | G22. <b>Ship To</b><br>DoDAAC: AC1793<br>Name: XU CDR, US ARMY YUMA PROVING GROUND<br>ATTN: CSTE-DTC-YP-YT-AV<br>301 C STREET (BLDG 3017)<br>YUMA AZ 85365 |                  |  |             |
| H22. <b>Administered By</b><br>Code: SUK12A<br>Name: DCMA NORTHERN EUROPE UNITED KINGDOM  |  |                 |                | I22. <b>Payment Official</b><br>DoDAAC: HQ0339<br>Name: DFAS - COLUMBUS CENTER   |                  |  |             |

# Example: WAWF Receiving/Acceptance Report

page 2

## RECEIVING REPORT

- CONTINUATION SHEET, LINE ITEM DETAILS -  
(Please look in WAWF for signed copy)

|   |                       |
|---|-----------------------|
| <b>Contract Number</b><br>W15QKN05C1173 | <b>Delivery Order</b> |
| <b>Shipment Number</b><br>RDB0378       | <b>Invoice Number</b> |

| Item No | Stock No   | Unit Price | Unit of Issue     | Qty Shipped     | Amount |
|---------|--|------------|-------------------|-----------------|--------|
| 0005    | LW0354   | \$0.00     | EA                | 1               | \$0.00 |
|         | <b>Stock Type</b><br>SN  | <b>AAA</b> | <b>ACRN</b><br>BV | <b>GFE</b><br>N |        |
|         | <b>Description</b><br>LW155, M777 Howitzer SN LW0354 - forms part of milestone 30. |            |                   |                 |        |

**TOTAL:** \$0.00

ACCEPTED IN WAWF



## Example: WAWF Receiving/Acceptance Report

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**RECEIVING REPORT**

-- CONTINUATION SHEET, MISCELLANEOUS INFORMATION --  
 (Please look in WAWF for signed copy)

**Contract Number**

W15QKN05C1173

A22.

**Delivery Order****Shipment Number**

RDB0378

A22.

**Invoice Number**

M22.

**Initiator Information**

Name: Kay Bradgate

Title: Mrs

Phone #: +44 1229 873356

DSN:

Email: rodaspayments@baesystems.com

Org Email: Simon.riley@baesystems.com

N22.

Date of Action: 2008/04/21 0210 MDT

Action(s): Submitted Web, Stand Alone

Comments:

MarkFor Representative:

MarkFor Secondary:

Attachment(s):

O22.

**Acceptor Information**

Name: Christopher Hatch

Title: Product and Process Mngr

Phone #: (973) 724-2841

DSN:

Email: chatch@pica.army.mil

Org Email:

P22.

Date of Action: 2008/04/22 1121 MDT

Action(s): Accepted Processed via EDI

Comments:

MarkFor Representative:

MarkFor Secondary:

Attachment(s):

**ACCEPTED IN WAWF**

## Appendix A - List of Acronyms / Abbreviations

| List of Acronyms / Abbreviations |  |
|----------------------------------|--|
| AAC                              | Activity Address Code                                  |
| ACO                              | Administrative Contracting Officer                     |
| ACRN                             | Accounting Classification Reference Number             |
| AO                               | Accountable Officer                                    |
| B/L                              | Bill of Lading   |
| CMR                              | Consolidated Memorandum of Receipt                     |
| CO                               | Commanding Officer                                     |
| CON CODE                         | Condition Code   |
| CQA                              | Contract Quality Assurance                             |
| CUTOFF-DT                        | Cutoff Date  |
| DIST                             | Distribution   |
| DOC IDENT                        | Document Identifier                                    |
| DOD                              | Department of Defense                                  |
| DODAAD                           | Department of Defense Activity Address Directory       |
| DoN                              | Department of the Navy                                 |
| E&C                              | Existence and Completeness                             |
| FIAR                             | Financial Improvement and Audit Readiness              |
| FIP                              | Financial Improvement Plan                             |
| FOB                              | Freight on Board                                       |
| FSC                              | Federal Supply Classification                          |
| GBL                              | Government Bill of Lading                              |
| ISS                              | Issued   |
| KSD                              | Key Supporting Documentation                           |
| LOA                              | Letter of Authorization                                |
| LOC CODE                         | Location Code  |
| LOT NO                           | Lot Number   |
| MAL                              | Mechanized Allowance List                              |
| ME                               | Military Equipment                                     |
| MIPR                             | Military Interdepartmental Purchase Request            |
| MIRR                             | Material Inspection and Receiving Report               |
| NMFC                             | National Motor Freight Classification Commodity Number |
| NO CONT                          | Number of Containers                                   |
| NSN                              | National Stock Number                                  |
| OC                               | Operation Code   |

| <b>List of Acronyms / Abbreviations</b> |   |
|---|---|
| OUSD                                    | Office of the Under Secretary of Defense  |
| OUSD (AT&L)                             | Office of the Under Secretary of Defense for Acquisitions, Technology and Logistics |
| PCO                                     | Procuring Cract Ofontficer  |
| QTY                                     | Quantity  |
| RIC                                     | Routing Identifier Code   |
| RO                                      | Responsible Officer   |
| SCAC                                    | Standard Carrier Alpha Code   |
| SecDef                                  | Secretary of Defense  |
| SF                                      | Standard Form   |
| STK LEV                                 | Stock Level   |
| TAC                                     | Transportation Account Code   |
| TAMCN                                   | Table of Authorize Materiel Control Number  |
| TCN                                     | Tracking Control Number   |
| TCO                                     | Terminating Contracting Officer   |
| T/E RQMT                                | Table of Equipment Requirement  |
| TIC                                     | Type Inventory Code   |
| TPC                                     | Type Pack Code  |
| UI                                      | Unit of Issue   |
| UIC                                     | Unique Identifier Code  |
| UP                                      | Unit Pack   |
| USMC                                    | United States Marine Corps  |
| WT                                      | Weight  |

## Appendix B - KSD Completion Instructions

### Instructions: Award/Contract SF26

#### INSTRUCTIONS for STANDARD FORM 26

Instructions below correspond to blocks on the form. This form is NOT used for a solicitation.

1. Include the DPAS rating if applicable IAW FAR Subpart 11.6 and page information.
2. Insert the award PIIN once you've made award IAW DFARS 204.7003.
3. 19C., and 20C. The format for this form's date blocks is MM/DD/YY.
4. Insert the purchase requisition (PR) number from your PR form (i.e., DA 3953, NAVCOMP 2276, AF 9, etc.). This will normally be different from the PIIN. If applicable, you should also include the construction project number from your PR.
5. Insert the issuing contracting office information (and its code, if applicable).
6. Leave this blank unless administration functions are done somewhere other than the office shown block 5.
8. Place an X in the appropriate box to indicate whether Free on Board (FOB) will be Origin or Other (Destination or Government Pick Up). If Other, place the FOB in 15B or somewhere in the schedule (i.e., Section B).
9. Insert any discounts the contractor offered for expeditious payment.
10. Insert item 5, 6, 11, or 12, depending on where the contractor should address its invoice to receive proper and timely payment.
11. Insert the address the contractor should deliver item(s) or perform service(s) (and code, if applicable). If there will be multiple delivery points or performance areas, insert "see schedule, section ?-(usually F) and list the specific delivery points or performance areas in that section.
12. Insert the paying address (and code, if applicable).
13. See FAR Part 6.3 for guidance.
14. Insert the fund cite(s) from which you'll make payment. If the cite(s) will not fit in this block, insert "see schedule, section ?"-(usually G) and list your cite(s) in that section.
15. Complete these blocks as defined. If the item(s) will not fit in this block, insert "see schedule, section ?"-(usually B) and list your item(s) in that section.
16. Place an "X" in each section included in the solicitation / award and the number of pages in each applicable section. Note that since this is an award and not a solicitation, you will still include the numbering information in Part IV, sections K-M. However, you will not actually send those to the contractor as part of the award, but will keep them as part of your contract file. You will merely state those sections are incorporated by reference and remain in full force and effect.
- 17 or 18. Unless circumstance dictate otherwise, we recommend you check block 17 and obtain a bilateral agreement.
19. Insert the name and title of the contractor's authorized signature authority and have that person sign and date the offer before the contracting officer signs.
20. Insert the contracting officer's printed or typed name and have her / him sign and date. An award is not valid until the contracting officer completes these blocks.

## Instructions: Military Interdepartmental Purchase Request (MIPR) DD Form 448

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| <b>COMPLETION INSTRUCTION BY BLOCK NUMBER FOR DD FORM 448-MILITARY INTERDEPARTMENTAL PURCHASE REQUEST</b> |  |
|---|--|
| <b>(1)</b>  | Enter number of pages (includes attachments).  |
| <b>(2)</b>  | Enter Federal supply classification, if applicable.  |
| <b>(3)</b>  | Enter control symbol number, if applicable.  |
| <b>(4)</b>  | Enter the date MIPR is prepared. For amendments, enter the date the amendment is prepared.   |
| <b>(5)</b>  | Enter MIPR number which is also the SDN for a MIPR. See Table 5-4, item FF.  |
| <b>(6)</b>  | Enter the amendment number of the MIPR. On issuance of the first MIPR, enter "INITIAL". Consecutively number future amendments to the MIPR starting with 01.   |
| <b>(7)</b>  | Enter the complete address of the agency/activity that will be accepting the MIPR.   |
| <b>(8)</b>  | Enter the complete address of the agency/activity that is ordering the work/services/supplies.   |
| <b>(9)</b>  | Check the appropriate blocks.  |
| <b>(9a)</b>   | Enter the item number that relates to the description. If the MIPR is requesting more than one type of item of work/service, consecutively number each item.   |
| <b>(9b)</b>   | Enter the description of work/services being requested, the appropriate statement if order is an Economy Act order or a Project Order and a POC. For amendments, explain reason for increase/decrease.   |
| <b>(9c)</b>   | Enter quantity, if applicable.   |
| <b>(9d)</b>   | Enter unit of issue, if applicable.  |
| <b>(9e)</b>   | Enter estimated unit price. For amendment, enter amount of increase/decrease.  |
| <b>(9f)</b>   | Enter estimated total price (quantity X estimated unit price). For amendment, enter amount of increase/decrease.   |
| <b>(10)</b>   | Self explanatory.  |
| <b>(11)</b>   | Enter the grand total of the MIPR. For amendments, enter revised grand total (original amount plus/minus amended amount).  |
| <b>(12)</b>   | Enter transportation accounting classification if FOB contractor's plant.  |
| <b>(13)</b>   | Enter the address and DODAAD of the OPLOC/FAO that supports the ordering activity. Bills will be sent to the OPLOC/FAO that supports the ordering activity. Ordering activities may request "copies" of bills with supporting detail to be provided if so stated on the MIPR and agreed to by the performing activity. |
| <b>(14)</b>   | In the ACRN block, enter the accounting classification reference number, if applicable. In the following blocks enter the "billed to" accounting classification. If additional space is required for additional fund citations, provide in and attachment to the MIPR and make reference to                            |



## Instructions: Military Interdepartmental Purchase Request (MIPR) DD Form 448

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|      |   |
|------|---|
|      | the attachment on the form. In the supplemental accounting classification block include the SDN which is the same as the MIPR number in block 5. For amendments, enter amount of increase/decrease. |
| (15) | Enter the authorizing officer name (typed or printed).  |
| (16) | The authorizing officer will sign here. Electronic signature is authorized.   |
| (17) | Enter the date the MIPR signed. For amendments, enter the date the amendment is signed.   |

|   |  |
|---|--|
| <b>COMPLETION INSTRUCTIONS BY BLOCK NUMBER<br/>FOR DD FORM 448-2 (ACCEPTANCE OF MIPR)</b> |  |
| (1)   | Enter the address of the ordering activity. Address will be the same as that entered on block 8 of the DD Form 448.  |
| (2)   | Enter the MIPR number. This number will be the same as entered on block 5 of DD Form 448.  |
| (3)   | Enter the amendment number. This number will be the same as entered on block 6 of DD Form 448.   |
| (4)   | Enter the signature date. This date will be the same date as entered on block 17 of DD Form 448.   |
| (5)   | Enter the amount as entered on block 11 of DD Form 448.  |
| (6)   | Check the appropriate block.   |
| (7)   | Check, if applicable and enter comment/reasons in block 13.  |
| (8)   | In blocks 8a through 8c (self explanatory) enter the appropriate data if accepted through reimbursement. For amendments, in Blocks 8c-8d, enter amount of increase/decrease.   |
| (9)   | In blocks 9a through 9c (self explanatory) enter the appropriate data if accepted as a direct fund cite. It is recommended that the ordering activity issue a message/letter using a direct fund cite instead of the MIPR. For amendments, in Blocks 9c-9d, enter amount of increase/decrease.   |
| (10)  | Self explanatory.  |
| (11)  | Enter the grand total of MIPR. If grand total is different than that on DD Form 448, block 11, notify the ordering activity. This will require an amendment. For amendments, enter revised grand total (original amount plus/minus amended amount.   |
| (12a)   | Check block, if applicable and enter the additional dollar amount needed. Show justification in block 13.  |
| (12b)   | Check block, if applicable and enter amount that is no longer required and to be withdrawn by the ordering activity. When this block is filled out and returned to the ordering activity, no change orders are required by the ordering activity. Upon receipt of DD Form 448-2 and block 12b is checked and amount shown, adjust obligations accordingly. |
| (13)  | Enter remarks, if applicable. Enter the appropriate statement if order is an Economy Act order or a Project Order and a POC.   |
| (14)  | Enter the complete address of the accepting (performing) activity.   |



# Instructions: Military Interdepartmental Purchase Request (MIPR) DD Form 448

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|             |  |
|-------------|--|
| <b>(15)</b> | Enter the typed/printed name of the authorized official that is accepting the order. |
| <b>(16)</b> | The authorized official accepting the order will sign here.                          |
| <b>(17)</b> | Enter date that DD Form 448-2 is signed.   |

## Instructions: U.S Government Bill of Lading (GBL) SF 1103

page 1

### 1. B/L NUMBER

Enter a bill of lading number. Each bill of lading number is unique.

See OBTAINING AND CREATING BILL OF LADING NUMBERS, Chapter 7 for information on bill of lading numbers.

### 2. TRANSPORTATION COMPANY TENDERED TO

Enter the full business name of the initial line-haul Transportation Service Provider (TSP) to which the shipment is tendered. The business name should include the words "Company," "Incorporated," or "Limited," as appropriate. (These words may be abbreviated as Co., Inc., and Ltd.) No other company or TSP abbreviation, initial, or symbol may be used.

If a different TSP actually picks up the shipment, the name of the pickup TSP should be indicated in parentheses following the name of the origin line-haul TSP.

For shipments tendered to TSPs under the GSA Centralized Household Goods Traffic Management Program (*civilian agencies only*), enter the name of the transportation company that is party to a GSA Tender of Service Agreement.

### 3. SCAC

Enter the origin line-haul TSP's four letter Standard Carrier Alpha Code (SCAC).

SCACs are a means of TSP identification and **must** be included on bills of lading. These codes are an integral part of the government's transportation management system.

SCACs are assigned by the National Motor Freight Traffic Association, Inc (NMFTA) for all TSPs except railroads. All SCACs are listed in the Directory of Standard Carrier Alpha Codes, published by NMFTA.

TSPs may request a SCAC by writing to NMFTA, 1001 North Fairfax Street, Suite 600, Alexandria, VA 22314. NMFTA's web site is <http://www.nmfta.org>.

Railroad companies should write the Association of American Railroads, 50 F Street, NW, Washington, DC 20001-1564.

### 4. DATE B/L PREPARED

Enter the date the first entry is made on the bill of lading.

### 5. DESTINATION NAME AND ADDRESS

Enter the final destination point where the TSP is to make actual delivery of the shipment to the consignee. Use the complete address (name of federal activity, street address, city, town or point, state and ZIP Code or country) and commercial telephone number.

## Instructions: U.S Government Bill of Lading (GBL) SF 1103

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If there are two or more cities or towns of the same name in the same state, the name of the county must be shown in addition to the city or town and state.

Include any additional information that will ensure shipment delivery to the specified destination. For example, gate entrance, building or warehouse number, bus terminal, station identification, railroad team track, or private siding within the limits of which the consignee receives carload freight. If space is insufficient, add the words "See Marks and Annotations" and insert the information in the MARKS AND ANNOTATIONS space.

### **STANDARD POINT LOCATION CODE:**

- 6. SPLC (DEST.)**
- 7. SPLC (ORIG.)**

*Civilian agencies may disregard these spaces.*

Enter the nine-digit Standard Point Location Code (SPLC) for a shipment's origin and destination as published in applicable TSP tariffs and tenders. These codes must be on all bills of ladings issued by the Department of Defense (DOD). SPLC numbers are listed in the Continental Directory of Standard Point Location Codes, published by the National Motor Freight Traffic Association, Inc.

### **8. ORIGIN NAME AND ADDRESS**

Enter the exact shipping point where shipment originates. Include the complete street address, city, town or metropolitan area, state and ZIP Code.

Complete information is necessary because shipping points, railheads, or billing stations are not always located in the same place. When there are several TSP stations within or adjacent to a metropolitan area, insert the full name of the city and state and the full name of the station or street address, including the ZIP Code where the shipment is tendered.

### **9. CONSIGNEE (Name and full address of installation)**

Enter the full name and title, room number, and mailing address, including ZIP Code of the department, activity, and person designated to receive the shipment at its final destination. Only one consignee should be listed in this space. When the person to be notified of the delivery differs from the consignee, the name of the person to be notified should also be shown, preceded by the word "Notify."

When the shipment is consigned for delivery to a person or location other than the mailing address shown, add the words, "See Marks and Annotations" and insert an explanation in the MARKS AND ANNOTATIONS space.

### **10. GBLOC (Cons.)**

*Civilian agencies may disregard this space.*



## Instructions: U.S Government Bill of Lading (GBL) SF 1103

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The GBL Office Code (GBLOC) should be completed on all DOD GBL's, including GBLs converted from commercial bills of lading.

Enter the GBLOC which identifies the military installation, activity or office that is the consignee for the shipment. The common code "1001" should be entered if the consignee has not been assigned a GBLOC.

GBLOCs assigned to DOD activities/shippers are listed in the Defense Transportation Regulation (DTR) DOD Regulation 4500.9-R.

### 11. SHIPPER NAME AND ADDRESS

Enter the proper name, address, and ZIP Code of the government shipping activity authorizing and responsible for the shipment. Initials or abbreviations of the activity should only be used when absolutely necessary.

When a bill of lading is furnished to a contractor to make a shipment that has been authorized by a government activity, the full name of that contractor should also be shown. In this case, the following statement must be added after the contractor's name: "For the account of" or "A/C" and the name of the government activity authorizing the shipment.

### 12. APPROPRIATION CHARGEABLE

Enter the complete government appropriation against which the cost of transportation is to be charged.

When more than one appropriation is involved, each item or weight should be referenced to the proper appropriation, and the total for each account should be inserted in this space. If more additional space is required, use the MARKS AND ANNOTATIONS or DESCRIPTION OF ARTICLES space on the GBL or SF 1109, U.S. Government Bill of Lading Continuation Sheet, and cross-reference the appropriation chargeable space.

Example:

| MARKS AND ANNOTATIONS |      |          |
|-----------------------|------|----------|
| 0.117.7.39139.522     | 1750 | \$152.07 |
| 0.117.7.39139.528     | 1080 | \$ 93.86 |
| 0.117.7.39139.535     | 6    | \$ .52   |
|                       |      |          |

### 13. VIA (*Route shipment when advantageous to the Government*)

This space should usually be left blank. The origin TSP is obligated to forward shipments over a route which will provide the lowest published charges within the mode.

## Instructions: U.S Government Bill of Lading (GBL) SF 1103

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### Route Shipments when Advantageous to the Government

Enter the complete routing for carload quantities via rail, or equivalent quantities via motor or water, only when some substantial interest of the government is served thereby. If the space in this space is not sufficient for showing the full name of each TSP in the route, authorized initials or abbreviations may be used. Junction or interchange points should not be used unless they are required by tender or tariff.

Routings should be selected by experienced transportation personnel who are aware of various tariff restrictions and limitations. This will ensure that required transportation services are obtained at the lowest possible cost to the government.

Routing instructions on the bill of lading must be correct and legible. When there is doubt regarding the most advantageous route, do not specify TSP(s).

### Rail Switching TSPs

When a rail switching TSP is required to complete delivery at destination, the authorized initials or abbreviations of the name of the switching TSP should be shown in parentheses next to the initials of the road or line-haul TSP, followed by the words "Switch Delivery"

**VIA (Route shipment when advantageous to the Government)**

CR-RFP-CSXT (NS). Switch Delivery

### Classified and Sensitive Material

(DOD activities only)

**VIA (Route shipment when advantageous to the Government)**

SUBSTITUTE SERVICE NOT TO BE USED: CCOI 42011

For all motor movements of classified and sensitive material, annotate "Substitute Service Not to Be Used."

### **14. BILL CHARGES TO (Dept/agency, bureau/office mailing address and ZIP Code)**

Enter the complete name and correct mailing address, including the ZIP Code, of the office that will pay and/or authorize the transportation charges. The TSP's bill, together with the original bill of lading properly certified by the TSP, will be forwarded to the name and address shown in this space. Initials or abbreviations of the federal activity should only be used when absolutely necessary.

When more than one office is responsible for payment of charges, enter the name and address of the disbursing office accountable for the largest portion of weight listed on the bill of lading.



## Instructions: U.S Government Bill of Lading (GBL) SF 1103

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### **15. AGENCY LOC CODE**

DOD activities may disregard this space.

Bills of lading involving shipments for civilian agencies should also have an Agency Location Code (ALC) entered in this space. ALCs are assigned in accordance with procedures in the Treasury Financial Manual for Guidance of Departments and Agencies, Volume 1, Part 2, Section 3320. The ALC to be used should be obtained from the agency's local finance or accounting officer.

### **16. MARKS AND ANNOTATIONS**

This space should be filled out when special marks or identifying symbols are used on packages or boxes comprising the shipment. Special marks assist in handling, accounting, and storing, and serve other useful purposes after the shipment has been delivered.

Supplemental data may also be entered in this space when space in other spaces is insufficient. When used for this purpose, data should be cross-referenced to the appropriate space.

When shipments are intended at destination for some person other than the consignee or for trans-shipment, insert the word "For" followed by the name or code, if applicable, of the person or activity to whom the delivery is to be made.

When a shipment is made to a port of export, insert the words "For Export," and follow with the name of the destination country.

When accessorial or special services are ordered incident to the line-haul transportation, the bill of lading must be endorsed to show the name of the TSP upon which the request was made and the kind and special services ordered. The endorsement may be placed in this space or on SF 1109, U.S. Government Bill of Lading Continuation Sheet and signed by or for the person who ordered the service.

If additional space is required, special notations may be entered on SF 1109 and cross-reference in this space.

### **PACKAGES:**

**17. NO**

**18. KIND**

This space should show the total number of each type of package applicable to each group of articles opposite the related description of such articles as shown in the DESCRIPTION OF ARTICLES space.

A separate entry must be made for each article that is classified differently. Each type of container or package used, such as barrels, boxes, crates, drums, or cylinders, must be shown. Customary abbreviations may be used to describe the type of container used in the shipment. Generally, only the type of outer container or package is entered in this space,



## Instructions: U.S Government Bill of Lading (GBL) SF 1103

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since inner containers or packages do not determine the classification rating or the freight rate.

### Household Goods

*(Civilian agencies only)*

Enter "1 LOT" in this space.

### Pallet Loads

When articles are shipped on pallets, the number of packages comprising the pallet load must be shown (e.g., 2 pallets of 20 boxes each; 1 bundle of 4,000 board feet).

### Articles Shipped Loose

If articles are shipped loose, the number of pieces or units and the related description of such articles should be entered.

### Bulk Shipments

When carload shipments of bulk freight such as coal, ore, gravel, sand, or loose grain are made, this space should be disregarded.

### **19. HM (Hazardous Material)**

Enter an "X" if the shipper is requesting transportation for any hazardous materials subject to the Department of Transportation Regulations (Title 49, Code of Federal Regulations (CFR)). Then list the hazardous material(s) under "DESCRIPTION OF ARTICLES".

### **20. DESCRIPTION OF ARTICLES *(Use carrier's classification or tariff description if possible; otherwise use a clear nontechnical description.)***

Enter the proper freight description and any other information or special instructions to the TSP concerning the items being shipped. When freight items are subject to a released valuation, such released valuation must be shown on the bill of lading.

The information in this space should conform to the governing TSP's classification, tender or tariff description. The description of articles provided in the TSP's freight classification determines the freight rate to be applied.

If there is doubt concerning the proper description, a clear, non-technical description should be placed in this space. Trade names may be added in parentheses to the description if it will aid in proper classification of the commodity shipped. It is important that "used" articles or property be so designated in the description of articles.

SF 1109, Continuation Sheet should be used if additional space is needed to complete the description of articles to be shipped.

## Instructions: U.S Government Bill of Lading (GBL) SF 1103

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### Water Shipments

Rail or motor commodity descriptions should not be used for water shipments, unless so provided in the TSP's tariff.

### Hazardous Materials

When shipping the hazardous materials listed in Title 49 of the Code of Federal Regulations (49 CFR 172.101), the description must be shown as listed therein. If the hazardous material description differs from the governing applicable rate authority description, the hazardous material description, including the appropriate United Nations number, must be shown first, and immediately behind it in parentheses, the applicable rate authority description. The hazardous class number must be shown on all international shipments. Abbreviations must not be used. When both a hazardous material and a non-hazardous material are listed, the hazardous material must be shown first or entered in a contrasting color.

Since hazardous materials regulations are subject to change, it is recommended the U.S. Department of Transportation's Hazardous Materials Regulations (49 CFR, Parts 171 through 180) be reviewed prior to such shipments. The U.S. Department of Transportation, Pipeline and Hazardous Materials Safety Administration (PHMSA) is responsible for coordinating a national safety program for the transportation of hazardous materials by air, rail, highway, and water. PHMSA Internet Web site, <http://www.phmsa.dot.gov/hazmat>, is designed to disseminate information about the agency's programs and activities and to assist in complying with the Hazardous Materials Regulations.

The following certification, as required by 49 CFR 172.204, should also be included in the Descriptions of Articles space, when hazardous materials are shipped by conveyances other than air TSPs:

**"This is to certify that the above-named materials are properly classified, described, packaged, marked, and labeled, and are in proper condition for transportation, according to the applicable regulations of the Department of Transportation."**

\_\_\_\_\_  
Certifying Official

Shipments via air TSPs require the following certification:

**"I hereby certify that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and in proper condition for carriage by air according to applicable national governmental regulations."**

\_\_\_\_\_  
Certifying Official

These certifications must be legibly signed by a principal, officer, partner, or employee of the shipper or his agent. The signature may be manually produced by typewriter, or by other mechanical means.



## Instructions: U.S Government Bill of Lading (GBL) SF 1103

Household Goods

When civilian agencies move household goods on a GBL (SF 1103), the words "HOUSEHOLD GOODS AND PERSONAL EFFECTS," the pickup date(s), required delivery date(s), released value of the shipment, and storage in transit authorization should be entered in this space.  
Professional Books, Papers, and Equipment (Civilian Agencies)

If professional books, papers and equipment (PBP&E) are authorized to be shipped in the same lot with the household goods, the bill of lading must be annotated with a statement concerning PBP&E with estimated weight, separate administrative appropriation chargeable, and a request that PBP&E be packed and weighed separately. (See GSA guide: Shipping Your Household Goods Employee Guide which can be downloaded in pdf format from <http://www.gsa.gov/transportation>. Once you reach the website, click on the following links to the left: Household Goods Transportation, then Agency Shipping Household Goods and finally the Shipping Your HHG Employee Guide link.

The following additional information or instructions may also be included:

- Specific instructions to the TSP concerning any services required to protect a shipment during transit, such as heating, refrigeration, or exclusive use of the vehicle.
- A notation of released value when freight descriptions are based on released valuation and the shipping declaration is required on the bill of lading (per the applicable tariff).

A shipment is made at a restricted or limited valuation specified in an applicable rate authority or under which the lowest rate is available, unless otherwise indicated on the face of the bill of lading. When freight descriptions are based on released valuation and shipping declaration is required, the bill of lading should be annotated as follows:

"Released valuation not exceeding \_\_\_\_\_ per \_\_\_\_\_"  
(value) (unit of weight)

or simply;

"RVNX \_\_\_\_\_ per \_\_\_\_\_"  
(value) (unit of weight)

Cite the approving authority for declaring excess valuation on high value material, if such valuation is necessary. Intermodal shipments require a separate notation for each mode of transportation because released valuations may differ for each mode.

- Cubic feet for each item or group of items as well as the total number of cubic feet when charges are based on the cubic measurements of the articles shipped. In determining cubic measurements of items of irregular shape, the greatest dimensions in length, width, and height must be used.
- Actual measurements of the commodity as packed for shipment when charges for air shipments are based on volume weight instead of actual weight.

## Instructions: U.S Government Bill of Lading (GBL) SF 1103

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### **21. WEIGHTS\* (POUNDS ONLY)**

The gross weight of the package(s) must be shown separately in the weight column opposite the appropriate description of the package(s) in the DESCRIPTION OF ARTICLES space.

The weight of pallets, platforms, or skids on which a shipment may be loaded should be shown separately on the bill of lading because some TSP tariffs provide that no charge will be made for their weight when it is shown separately.

When continuation sheets are required for separate listings of all packages, their total weight should be shown on the original bill of lading with a reference to the continuation sheet.

Weights are specified as "actual," "estimated," or "agreed." When "agreed" weights are used, reference to the weight agreement and the name of the issuing bureau should be shown on the original bill of lading. When "actual" weights cannot be determined before the shipment is made, estimated weights should be shown and the notation "Estimated weights; weigh and correct" should be placed on the bill of lading.

When property is shipped in truckload, carload or equivalent quantities, and dunnage, such as blocking, temporary lining, racks, bracing, or strapping is required; the weight of the dunnage must be shown separately. Provisions for dunnage allowances vary under the applicable tariffs.

The importance of correctly stating the applicable weight for shipments is self-evident. Since TSP's freight charges are based primarily on weight, it becomes a controlling factor in the efficient and economical expenditure of government transportation funds.

\*Show also cubic measurements for shipments via air, truck or water in cases where required.

### **FOR USE OF BILLING ONLY:**

**22. SERVICES**

**23. RATE**

**24. CHARGES**

**26. TOTAL CHARGES**

This section is for the sole use of the billing TSP who inserts the services provided and the proper rates and charges.

This section is left blank on the original and all copies furnished to the TSP. (The issuing officer may use this space to show estimated transportation charges and such accounting classifications as may be administratively required.)

### **25. CLASSIFICATION ITEM NO.**

Enter the Uniform Freight Classification or the National Motor Freight Classification number for the article described on the bill of lading. When the shipment consists of more than one commodity, the classification number should be shown after each commodity listed in the DESCRIPTION OF ARTICLES space. This space can then be left blank. When the commodity description is "Freight of All Kinds," the appropriate number shown in the



## Instructions: U.S Government Bill of Lading (GBL) SF 1103

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applicable government freight tender or rules publication governing the movement of freight traffic should be used.

### **27. TARIFF/SPECIAL RATE AUTHORITY**

For carload, truckload, container, or volume shipments enter the tariff reference or special rate quotation under the provisions of 49 U.S.C. 10721, 13712. This reference is entered as a source of information; an audit of charges will not be limited to what is referenced.

When special rate quotations provide a reduction in transportation costs for shipments, regardless of their weight, including less-than-carload quantities, these rate authorities should be indicated. One time only quotes and rate agreements should be shown and copies attached to the bill of lading. Use the TSP's SCAC followed by the tariff or rate quotation number.

### **28. CARRIER WAY/FREIGHT BILL NO. AND 29. DATE**

The TSP should transfer their way or freight bill number to this space and provide the date prior to billing for charges. This information is useful to the shipper and consignee for tracing and claims purposes.

### **30. STOP THIS SHIPMENT AT**

Rail and motor TSP tariffs generally provide stop off-in-transit to partially load or unload shipments. This TSP service permits a conveyance to be stopped at one or more intermediate points during transit for the purpose of loading or unloading freight prior to arrival at the final destination. Charges are based on the total maximum weight shipped from original point of origin to final destination plus the stop off charges. Combining several shipments moving to or from the same general geographical area often results in lower overall transportation costs.

It is important that complete instructions are provided to the TSP on the bill of lading to ensure that all parties involved with such shipments are aware of the special loading or unloading requirements.

When a shipment is to be stopped in transit for partial loading or unloading, the following information must be fully and completely shown on the bill of lading:

- The point at which the stop is to be made.
- The purpose for the stop (to complete loading or to partially unload).
- The full name and address of the party to be notified at the stopoff point.
- The quantity of freight to be loaded or unloaded at each stopoff point.

If this space does not provide enough room, additional information may be shown in the MARKS AND ANNOTATIONS, DESCRIPTION OF ARTICLES, or on SF 1109, U.S. Government Bill of Lading Continuation Sheet. Appropriate cross-reference should be made in this space.

## Instructions: U.S Government Bill of Lading (GBL) SF 1103

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Each portion of the shipment to be partially loaded or unloaded at intermediate points should be identified in the DESCRIPTION OF ARTICLES space.

Inclusion of the above details concerning the material to be stopped in transit will enable TSPs to perform the service with a minimum of delay.

### Notification to Consignees

It is also necessary that each intermediate consignee at the stop off points is notified promptly of the shipment. This may be accomplished by the consignor forwarding a copy of the bill of lading to the intermediate consignees at the time the shipment is tendered to the origin TSP.

Under the GBL distribution procedures where the original SF 1103 is furnished to the origin TSP at the time of shipment, the intermediate consignee at the stop off point will issue a certificate to the stop off TSP and furnish copies to any other intermediate consignee and the final consignee. This certificate will provide specific details concerning the material loaded or unloaded at the stop off locations (GBL number, conveyance number, final destination, seal numbers, stop off points, portion of shipment loaded or unloaded, date of stop off and any loss, damage, or other discrepancies noted at the time the shipment is received at the stop off point).

### Reporting Loss & Damage

Each consignee who discovers losses, damages, or other discrepancies must report them on government prescribed forms to the government paying office and other designated offices, as required by the agency issuing the bill of lading.

### **31. FOR**

#### *Civilian Agencies Only*

If the SF 1103 is used for a household goods movement and there is to be a pickup in addition to the one at the origin residence, the extra pickup address should be entered in the STOP THIS SHIPMENT AT space and the words "EXTRA PICKUP" should be entered in this space.

If a delivery is to occur in addition to that at the final destination residence or warehouse, the extra delivery address should be entered in the STOP THIS SHIPMENT AT space and the words "EXTRA DELIVERY" should be entered in this space.

### **32. CARRIER'S PICKUP DATE** (*Year, month, and day*)

The TSP to whom the shipment is tendered must complete this space. The bill of lading is legally in effect and the TSP assumes responsibility for the shipment on the date appearing in this space.



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The applicable rate on any shipment is the one published and in effect on the date the shipment is accepted by the TSP. If the published rate changes while the shipment is en route, the TSP's pickup date, determines which rate applies.

### FURNISH INFORMATION ON CAR/TRUCKLOAD/CONTAINER SHIPMENTS

#### SEAL NUMBERS:

##### 33. APPLIED BY

When a shipment is made in one or more closed rail cars, closed motor vehicles, or containers and these commercial conveyances are sealed at the point of origin, this space should show each of the seal numbers and who applied them (shipper for rail cars and intermodal containers; shipper or TSP for motor vehicles). When shipments are made by commercial conveyance, the TSP has access to his equipment during transit, even if seals are applied. If motor vehicles are loaded to full visible capacity, they should be sealed by the shipper. Seals are applied to protect the cargo in transit from pilferage or damage. Sealing of a truck does not trigger application of exclusive use vehicle rates.

A record of the original seal numbers assists in determining liability when equipment arrives at the destination with broken or missing seals or when loss, damage, or shortage is subsequently discovered in the shipment. Any changes from the original seal numbers should be noted by the consignee on his copy of the delivering TSP's documents and the consignee's copy of the bill of lading, if available. All notations must be signed by the consignee and the TSP's agent.

#### LENGTH/CUBE:

##### 34. ORDERED

##### 35. FURNISHED

This space must be completed when a railcar, truck, or container of a specific length or cubic capacity is ordered to accommodate a shipment. The information is required to ensure that the lowest freight charge will be applied to the shipment.

Enter the length (in feet and inches) or cubic feet of railcar (TSP or government-owned), motor vehicle, container, or barge ordered and furnished.

When carload, truckload, or containerized shipments are involved, TSPs cannot always furnish equipment of the length and cubic capacity ordered. They may furnish units of greater length and cube. If the bill of lading does not show the length and cubic capacity of the conveyance ordered, charges will be assessed on the minimum weight or cube applicable to the conveyance furnished and used. If the bill of lading shows a conveyance smaller than that furnished was ordered, charges will usually be based on the size of the smaller conveyance, unless otherwise provided by TSP tariff or other governing publication.

This space should not be completed when less-than-truckload shipments are involved, unless required by tariff or tender.

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### When Size Ordered is Not Available

If a TSP indicates prior to furnishing the conveyance that he does not have the size ordered and offers one of a greater size or capacity, the larger size conveyance may be accepted if the TSP is willing to have the bill of lading annotated:

"THIS SIZE CONVEYANCE FURNISHED FOR THE CONVENIENCE OF THE TSP"

This notation will generally protect the minimum weight or cube for the conveyance ordered.

**WARNING:** If a shipper permits the loading of his shipment on equipment provided by the TSP which is different than the one he ordered, that constitutes acceptance of the equipment provided, and charges will be assessed on the basis of the equipment actually used.

### **MARKED CAPACITY:**

**36. ORDERED**

**37. FURNISHED**

When one or more railcar or container is ordered for a shipment, or when exclusive use of a vehicle is required, enter the desired capacity, and if available, the marked capacity of the equipment such as pounds and/or cubic feet.

Loading rail freight cars is normally the responsibility of the shipper. Care should be exercised to prevent overloading when heavy commodities are involved, as unloading or reloading excess weight is quite costly.

Disregard this space when shipments are made in less-than-truckload quantities.

### **38. DATE FURNISHED**

This space must be completed when the shipment comprises one or more carloads, truckloads, or containers.

"DATE FURNISHED," means the date on which the conveyance is placed in a satisfactory condition for loading.

The date on which a conveyance is furnished serves as a basis for determining the application of demurrage or detention charges and will govern the free time allowed for loading and/or unloading. Omission of this date could result in the payment of erroneous demurrage or detention charges.

When shipments are by ship or barge, it is also important to show the date the vessel is available for loading.

Disregard this space when shipments are made in less-than-truckload quantities.



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### **39. MODE**

Enter the type of transportation used for the shipment (motor, rail, air) or identify any special type of conveyance used to transport the shipment (boxcar, flatbed trailer, etc.).

*For DOD Shipments Only*

Use specific codes assigned for entry in these spaces. Codes are published in the Defense Transportation Regulation.

### **40. ESTIMATE**

Enter the estimated transportation cost for the shipment, if required by the issuing agency.

### **41. NO. OF CLS/TLS (Carload Shipment/Trailer Load Shipment)**

Enter the number of conveyances used. Cross out conveyance not used. (Disregard this space for less-than-truckload quantities.)

### **42. TYPE RATE**

Enter the type of rate used for the shipment (class, commodity, Sections 10721, 13712, contract, or mileage). If space is insufficient use the MARKS AND ANNOTATIONS space or see GENERAL INSTRUCTIONS AND ADMINISTRATIVE DIRECTIONS below if additional space is necessary.

*For DOD Shipments Only*

Use specific codes assigned for entry in these spaces. Codes are published in the DTR.

### **43. PSC (Protective Service Code)**

Shipments requiring transportation protective services during transit must show the appropriate PSC shown in the applicable government rules publications governing the shipment.

*For DOD Shipments Only*

Use specific codes assigned for entry in these spaces. Codes are published in the Defense Transportation Regulations

### **44. REASON**

*For DOD Shipments Only*

If a shipment cannot be sent via the lowest cost route, enter the appropriate reason code and the difference in cost in this space.

Specific codes assigned for entry in this space are published in the DTR.

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### **CERTIFICATE OF BILLING – CONSIGNEE MUST NOT PAY ANY CHARGES**

#### **45. DELIVERED ON (Year, month, and day)**

This space certify that the TSP has performed the services required by the BL and must be completed by the delivering TSP before the government pays the charges.

### **FOR USE OF ISSUING OFFICE**

#### **46. ISSUING OFFICE (Name and complete address)**

Enter the complete name and mailing address of the BL issuing office.

When GBL continuation sheets are used, the full name and complete mailing address of the issuing office must be shown in the space provided.

The issuing office is accountable for misuse, loss, or cancellation of a BL. Therefore, the specific office issuing the BL, as well as the department or agency, must be shown.

#### **47. GBLOC**

*For DOD Shipments Only*

Enter the GBLOC assigned to the issuing activity.

#### **48. ISSUING OFFICER**

Enter the typed or stamped name and title of the issuing officer. A manual or facsimile signature of the issuing officer's name is not required in this space except when issuing laser printed GBLs or when individual agency requires signature. When issuing laser printed GBLs, each original GBL should be signed in a color or ink other than black.

Only authorized personnel may issue GBLs. Regardless of whether the GBL is used by the issuing activity or by a contractor as shipper, only the name of the issuing officer or his authorized alternate is acceptable. Although the signature of the issuing officer is not required in this space, except as provided above, his typed name and title must appear on the original and all copies of the GBL. Therefore, if a facsimile name and title stamp is used, each copy of the GBL set must be individually stamped.

#### **49. CONTRACT/PURCHASE ORDER NO. OR OTHER AUTHORITY**

Enter the number of the procurement document, contract or purchase order number, or other authority for making the shipment.

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When one BL covers several lots of material with each lot under a different shipping authority, reference each shipping authority in connection with the description of the respective item or groups of items shown in the Consignee space.

For household goods shipments (*civilian agencies only*), enter the travel authorization number.

When the bill of lading is to be used by a contractor as shipper, it is particularly important that the issuing officer furnish the contractor with the contract or purchase order number, or other authority for shipment, its date, and f.o.b. point. In the absence of such data on a bill of lading, the TSP may refuse to accept the shipment from a contractor as shipper.

### **50. DATED**

Enter the date of the contract, purchase order, or other authority.

For household goods shipments (*civilian agencies only*), enter the date the relocation travel authorization was signed.

### **51. FOB POINT NAMED IN CONTRACT**

Enter the fob point of shipment named in the procurement document.



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### DFARS Appendix F

#### PART 4—PREPARATION OF THE DD FORM 250 AND DD FORM 250C

##### F-401 Preparation instructions.

###### (a) General.

- (1) Dates must use nine spaces consisting of the four digits of the year, three-position alphabetic month abbreviation, and two digits for the day. For example, 2000AUG07, 2000SEP24.
- (2) Addresses must consist of the name, street address/P.O. box, city, state, and ZIP code.
- (3) Enter to the right of and on the same line as the word "Code" in Blocks 9 through 12 and in Block 14—
  - (i) The Commercial and Government Entity Handbook (H4/H8) code;
  - (ii) The DoD activity address code (DoDAAC) as it appears in the DoD Activity Address Directory (DoDAAD), DoD 4000.25-6-M; or
  - (iii) The Military Assistance Program Address Directory (MAPAD) code.
- (4) Enter the DoDAAC, CAGE (H4/H8), or MAPAD code in Block 13.
- (5) The data entered in the blocks at the top of the DD Form 250c must be identical to the comparable entries in Blocks 1, 2, 3, and 6 of the DD Form 250.
- (6) Enter overflow data from the DD Form 250 in Block 16 or in the body of the DD Form 250c with an appropriate cross-reference. Do not number or distribute additional DD Form 250c sheets, solely for continuation of Block 23 data as part of the MIRR.
- (7) Do not include classified information in the MIRR. MIRRs must not be classified.

###### (b) Completion instructions.

- (1) Block 1—PROCUREMENT INSTRUMENT IDENTIFICATION (CONTRACT) NO. See paragraph [F-301\(b\)\(1\)](#).
- (2) Block 2—SHIPMENT NO. See [F-301\(b\)\(2\)](#), SHIPMENT NO. When the series is completely used, change the shipment number prefix and start with 0001.
- (3) Block 3—DATE SHIPPED. Enter the date the shipment is released to the carrier or the date the services are completed. If the shipment will be released after the date of CQA and/or acceptance, enter the estimated date of release. When the date is estimated, enter an "E" after the date. Do not delay distribution of the MIRR for entry of the actual shipping date. Reissuance of the MIRR is not required to show the actual shipping date (see [F-403](#)).
- (4) Block 4—B/L TCN. When applicable, enter—
  - (i) The commercial or Government bill of lading number after "B/L;"

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(ii) The transportation control number after "TCN" (when a TCN is assigned for each line item on the DD Form 250 under Block 16 instructions, insert "See Block 16"); and

(iii) The initial (line haul) mode of shipment code in the lower right corner of the block (see [F-402](#)).

(5) Block 5--DISCOUNT TERMS.

(i) The contractor may enter the discount in terms of percentages on all copies of the MIRR.

(ii) Use the procedures in F-406 when the MIRR is used as an invoice.

(6) Block 6--INVOICE NO./DATE.

(i) The contractor may enter the invoice number and actual or estimated date of invoice submission on all copies of the MIRR. When the date is estimated, enter an "E" after the date. Do not correct MIRRs other than invoice copies to reflect the actual date of invoice submission.

(ii) Use the procedures in [F-406](#) when the MIRR is used as an invoice.

(7) Block 7--PAGE/OF. Consecutively number the pages of the MIRR. On each page enter the total number of pages of the MIRR.

(8) Block 8--ACCEPTANCE POINT. Enter an "S" for Origin or "D" for destination.

(9) Block 9--PRIME CONTRACTOR/CODE. Enter the code and address.

(10) Block 10--ADMINISTERED BY/CODE. Enter the code and address of the contract administration office cited in the contract.

(11) Block 11--SHIPPED FROM/CODE/FOB.

(i) Enter the code and address of the "Shipped From" location. If identical to Block 9, enter "See Block 9."

(ii) For performance of services line items which do not require delivery of items upon completion of services, enter the code and address of the location at which the services were performed. If the DD Form 250 covers performance at multiple locations, or if identical to Block 9, enter "See Block 9."

(iii) Enter on the same line and to the right of "FOB" an "S" for Origin or "D" for Destination as specified in the contract. Enter an alphabetic "O" if the "FOB" point cited in the contract is other than origin or destination.

(iv) For destination or origin acceptance shipments involving discount terms, enter "DISCOUNT EXPEDITE" in at least one-half inch outline-type style letters across Blocks 11 and 12. Do not obliterate other information in these blocks.

(12) Block 12--PAYMENT WILL BE MADE BY/CODE. Enter the code and address of the payment office cited in the contract.

(13) Block 13--SHIPPED TO/CODE. Enter the code and address from the contract or shipping instructions.

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(14) Block 14--MARKED FOR/CODE. Enter the code and address from the contract or shipping instructions. When three-character project codes are provided in the contract or shipping instructions, enter the code in the body of the block, prefixed by "Proj"; do not enter in the Code block.

(15) Block 15--ITEM NO. See paragraph F301(b)(14) with the exception to F301(b)(2)(B)2 that line item numbers not in accordance with the Uniform Contract Line Item Numbering System may be entered without regard to positioning.

(16) Block 16--STOCK/PART NO./DESCRIPTION.

(i) Use single or double spacing between line items when there are less than four line items. Use double spacing when there are four or more line items. Enter the following for each line item:

(A) The national stock number (NSN) or noncatalog number. Where applicable, include a prefix or suffix. If a number is not provided, or it is necessary to supplement the number, include other identification such as the manufacturer's name or Federal supply code (as published in Cataloging Handbook H4-1), and the part number. Show additional part numbers in parentheses or slashes. Show the descriptive noun of the item nomenclature and if provided, the Government assigned management/material control code. The contractor may use the following technique in the case of equal kind supply items. The first entry shall be the description without regard to kind. For example, "Shoe-Low Quarter-Black," "Resistor," "Vacuum Tube," etc. Below this description, enter the contract line item number in Block 15 and Stock/Part number followed by the size or type in Block 16.

(B) On the next printing line, if required by the contract for control purposes, enter: the make, model, serial number, lot, batch, hazard indicator, or similar description.

(C) On the next printing lines enter—

(1) The MIPR number prefixed by "MIPR" or the MILSTRIP requisition number(s) when provided in the contract; or

(2) Shipping instructions followed on the same line (when more than one requisition is entered) by the unit for payment and the quantity shipped against each requisition.

Example:

|                        |           |
|------------------------|-----------|
| V04696-185-750XY19059A | — EA 5    |
| N0018801776038XY3211BA | — EA 200  |
| AT650803050051AAT6391J | — EA 1000 |

(D) When a TCN is assigned for each line item, enter on the next line the transportation control number prefixed by "TCN."

(ii) For service line items, enter the word "SERVICE" followed by as short a description as is possible in no more than 20 additional characters. Some examples of service line items are maintenance, repair, alteration, rehabilitation, engineering, research, development, training, and testing. Do not complete Blocks 4, 13, and 14 when there is no shipment of material.

(iii) For all contracts administered by the Defense Contract Management Agency, with the exception of fast pay procedures, enter and complete the following:



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Gross Shipping Wt. \_\_\_\_\_  
State weight in pounds only.

(iv) Starting with the next line, enter the following as appropriate (entries may be extended through Block 20). When entries apply to more than one line item in the MIRR, enter them only once after the last line item entry. Reference applicable line item numbers.

(A) Enter in capital letters any special handling instructions/limits for material environmental control, such as temperature, humidity, aging, freezing, shock, etc.

(B) When a shipment is chargeable to Navy appropriation 17X4911, enter the appropriation, bureau control number (BCN), and authorization accounting activity (AAA) number (e.g., 17X4911-14003-104).

(C) When the Navy transaction type code (TC), "2T" or "7T" is included in the appropriation data, enter "TC 2T" or "TC 7T."

(D) When an NSN is required by but not cited in a contract and has not been furnished by the Government, the contractor may make shipment without the NSN at the direction of the contracting officer. Enter the authority for such shipment.

(E) When Government furnished property (GFP) is included with or incorporated into the line item, enter the letters "GFP."

(F) When shipment consists of replacements for supplies previously furnished, enter in capital letters "REPLACEMENT SHIPMENT." (See [F-401](#), Block 17, for replacement indicators.)

(G) On shipments of Government furnished aeronautical equipment (GFAE) under Air Force contracts, enter the assignment AERNO control number, e.g., "AERNO 60-6354."

(H) For items shipped with missing components, enter and complete the following:

"Item(s) shipped short of the following component(s): NSN  
or comparable identification \_\_\_\_\_, Quantity  
\_\_\_\_\_, Estimated Value \_\_\_\_\_, Authority  
\_\_\_\_\_"

(I) When shipment is made of components which were short on a prior shipment, enter and complete the following:

"These components were listed as shortages on shipment number  
\_\_\_\_\_, date shipped \_\_\_\_\_"

(J) When shipments involve drums, cylinders, reels, containers, skids, etc., designated as returnable under contract provisions, enter and complete the following:

"Return to \_\_\_\_\_, Quantity \_\_\_\_\_,  
Item \_\_\_\_\_, Ownership (Government/contractor)."

(K) Enter the total number of shipping containers, the type of containers, and the container number(s) assigned for the shipment.

(L) On foreign military sales (FMS) shipments, enter the special markings, and FMS case identifier from the contract. Also enter the gross weight.

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(M) When test/evaluation results are a condition of acceptance and are not available prior to shipment, the following note shall be entered if the shipment is approved by the contracting officer:

"Note: Acceptance and payment are contingent upon receipt of approved test/evaluation results."

The contracting officer will advise—

(1) The consignee of the results (approval/disapproval); and

(2) The contractor to withhold invoicing pending attachment of the approved test/evaluation results.

(N) The copy of the DD Form 250 required to support payment for destination acceptance (top copy of those with shipment) or ARP origin acceptance shall be identified as follows: enter "PAYMENT COPY" in approximately one-half inch outline type style letters with "FORWARD TO BLOCK 12 ADDRESS" in approximately one-quarter inch letters immediately below. Do not obliterate any other entries.

(O) For clothing and textile contracts containing a bailment clause, enter the words "GFP UNIT VALUE."

(P) When the initial unit incorporating an approved value engineering change proposal (VECP) is shipped, enter the following statement:

This is the initial unit delivered which incorporates VECP  
No. \_\_\_\_\_, Contract Modification  
No. \_\_\_\_\_, dated \_\_\_\_\_

(17) Block 17--QUANTITY SHIPPED/RECEIVED.

(i) Enter the quantity shipped, using the unit of measure in the contract for payment. When a second unit of measure is used for purposes other than payment, enter the appropriate quantity directly below in parentheses.

(ii) On the final shipment of a line item of a contract containing a clause permitting a variation of quantity and an underrun condition exists, the prime contractor shall enter a "Z" below the last digit of the quantity. Where the final shipment is from other than the prime contractor's plant and an underrun condition exists, the prime contractor may elect either to—

(A) Direct the subcontractor making the final shipment to enter a "Z" below the quantity; or

(B) Upon determination that all subcontractors have completed their shipments, correct the DD Form 250 (see [F-405](#)) covering the final shipment of the line item from the prime contractor's plant by addition of a "Z" below the quantity. Do not use the "Z" on deliveries which equal or exceed the contract line item quantity.

(iii) For replacement shipments, enter "A" below the last digit of the quantity, to designate first replacement, "B" for second replacement, etc. Do not use the final shipment indicator "Z" on underrun deliveries when a final line item shipment is replaced.



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|     |                        |
|-----|------------------------|
| 17. | QUANTITY<br>SHIP/REC'D |
|     | 1000                   |
|     | (10)                   |
|     | Z                      |

(iv) If the quantity received is the same quantity shipped and all items are in apparent good condition, enter by a check mark. If different, enter actual quantity received in apparent good condition below quantity shipped and circle. The receiving activity will annotate the DD Form 250 stating the reason for the difference.

(18) Block 18--UNIT. Enter the abbreviation of the unit measure as indicated in the contract for payment. Where a second unit of measure is indicated in the contract for purposes other than payment or used for shipping purposes, enter the second unit of measure directly below in parentheses. Authorized abbreviations are listed in MIL-STD-129, Marking for Shipping and Storage. For example, LB for pound, SH for sheet.

|     |      |
|-----|------|
| 18. | UNIT |
|     | LB   |
|     | (SH) |

(19) Block 19--UNIT PRICE. The contractor may, at its option, enter unit prices on all MIRR copies, except as a minimum:

(i) The contractor shall enter unit prices on all MIRR copies for each item of property fabricated or acquired for the Government and delivered to a contractor as Government furnished property (GFP). Get the unit price from Section B of the contract. If the unit price is not available, use an estimate. The estimated price should be the contractor's estimate of what the items will cost the Government. When the price is estimated, enter an "E" after the unit price.

(ii) Use the procedures in [F-406](#) when the MIRR is used as an invoice.

(iii) For clothing and textile contracts containing a bailment clause, enter the cited Government furnished property unit value opposite "GFP UNIT VALUE" entry in Block 16.

(iv) Price all copies of DD Forms 250 for FMS shipments with actual prices, if available. If actual price are not available, use estimated prices. When the price is estimated, enter an "E" after the price.

(20) Block 20--AMOUNT. Enter the extended amount when the unit price is entered in Block 19.

(21) Block 21--CONTRACT QUALITY ASSURANCE (CQA).

(i) The words "conform to contract" contained in the printed statements in Blocks 21a and 21b relate to quality and to the quantity of the items on the report. Do not modify the statements. Enter notes taking exception in Block 16 or on attached supporting documents with an appropriate block cross-reference.

(ii) When a shipment is authorized under alternative release procedure, attach or include the appropriate contractor signed certificate on the top copy of the DD Form 250 copies distributed to the payment office or attach or include the appropriate contractor certificate on the

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contract administration office copy when contract administration (Block 10 of the DD Form 250) is performed by the Defense Contract Management Agency.

(iii) When contract terms provide for use of Certificate of Conformance and shipment is made under these terms, the contractor shall enter in capital letters "CERTIFICATE OF CONFORMANCE" in Block 21a on the next line following the CQA and acceptance statements. Attach or include the appropriate contractor signed certificate on the top copy of the DD Form 250 copies distributed to the payment office or attach or include the appropriate certificate on the contract administration office copy when contract administration (Block 10 of the DD Form 250) is performed by the Defense Contract Management Agency. In addition, attach a copy of the signed certificate to, or enter on, copies of the MIRR sent with shipment.

(iv) *ORIGIN.*

(A) The authorized Government representative must—

(1) Place an "X" in the appropriate CQA and/or acceptance box(es) to show origin CQA and/or acceptance. When the contract requires CQA at destination in addition to origin CQA, enter an asterisk at the end of the statement and an explanatory note in Block 16;

(2) Sign and date.

(3) Enter the typed, stamped, or printed name, title, mailing address, and commercial telephone number.

(B) When alternative release procedures apply—

(1) The contractor or subcontractor shall complete the entries required under paragraph (A) and enter in capital letters "ALTERNATIVE RELEASE PROCEDURE" on the next line following the printed CQA/acceptance statement.

(2) When acceptance is at origin and contract administration is performed by an office other than the Defense Contract Management Agency, the contractor shall furnish the four payment office copies of the MIRR to the authorized Government representative for dating and signing of one copy and forwarding of all copies to the payment office.

(3) When acceptance is at origin and contract administration is performed by the Defense Contract Management Agency, furnish the contract administration office copy of the MIRR to the authorized Government representative for dating and signing and forwarding to the contract administration office (see F-501, Table 1).

(C) When fast pay procedures apply, the contractor or subcontractor shall enter in capital letters "FAST PAY" on the next line following the printed CQA/acceptance statement. When CQA is required, the authorized Government representative shall execute the block as required by paragraph (A).

(D) When Certificate of Conformance procedures apply, inspection or inspection and acceptance are at source, and the contractor's Certificate of Conformance is required, the contractor shall enter in capital letters "CERTIFICATE OF CONFORMANCE" as required by paragraph (b)(21)(iii) of this appendix.

(1) For contracts administered by an office other than the Defense Contract Management Agency, furnish the four payment office copies of the MIRR to the authorized



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Government representative for dating and signing of one copy, and forwarding of all copies to the payment office.

(2) For contracts administered by the Defense Contract Management Agency, furnish the contract administration office copy of the MIRR to the authorized Government representative for dating and signing and forwarding to the contract administration office (see [F-401, Table 1](#)).

(3) When acceptance is at destination, no entry shall be made other than "CERTIFICATE OF CONFORMANCE."

(v) *DESTINATION.*

(A) When acceptance at origin is indicated in Block 21a, make no entries in Block 21b.

(B) When CQA and acceptance or acceptance is at destination, the authorized Government representative must—

(1) Place an "X" in the appropriate box(es);

(2) Sign and date; and

(3) Enter typed, stamped, or printed name, title, mailing address, and commercial telephone number.

(C) When "ALTERNATIVE RELEASE PROCEDURE" is entered in Block 21a and acceptance is at destination, the authorized Government representative must complete the entries required by paragraph (b)(21)(v)(B) of this appendix.

(D) Forward the executed payment copy or MILSCAP format identifier PKN or PKP to the payment office cited in Block 12 within four work days (five days when MILSCAP Format is used) after delivery and acceptance of the shipment by the receiving activity. Forward one executed copy of the final DD Form 250 to the contract administration office cited in Block 10 for implementing contract closeout procedures.

(E) When "FAST PAY" is entered in Block 21a, make no entries in this block.

(22) Block 22--RECEIVER'S USE. The authorized representative of the receiving activity (Government or contractor) must use this block to show receipt, quantity, and condition. The authorized representative must--

(i) Enter the date the supplies arrived. For example, when off-loading or in-checking occurs subsequent to the day of arrival of the carrier at the installation, the date of the carrier's arrival is the date received for purposes of this block;

(ii) Sign; and

(iii) Enter typed, stamped, or printed name, title, mailing address, and commercial telephone number.

(23) Block 23--CONTRACTOR USE ONLY. Self explanatory.

## Instructions: Issue Release/Receipt Document DD Form 1348

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### DD FORM 1348-1A ISSUE RELEASE/RECEIPT DOCUMENT FORMAT INSTRUCTIONS

| FIELD LEGEND              | RECORD POSITION(s) | ENTRY AND INSTRUCTIONS  |
|---------------------------|--------------------|---|
| Document Identifier       | 1-3                | Perpetuate from requisition of source document unless otherwise indicated.  |
| Routing Identifier (From) | 4-6                | Enter the RI code of the shipping activity.   |
| Media and Status          | 7                  | Enter the M&S code assigned to the requisition or source document.  |
| Stock or Part Number      | 8-22               | Indicate the NSN or part number being released. See Block 25.   |
| Unit of Issue             | 23-24              | Indicate the U/I of the NSN or part number being released.  |
| Quantity                  | 25-29              | Indicate the quantity being released. See Block 26.   |
| Document Number           | 30-43              | Enter the document number or requisition. See Block 24.   |
| Suffix Code               | 44                 | Leave blank if the document represents release of the total quantity requisitioned. Indicate the appropriate suffix code assigned to indicate a partial quantity release. See Block 24. |
| Supplementary Address     | 45-50              | Perpetuate from the original requisition or source document. See Block 26.  |
| Signal                    | 51                 | Perpetuate from the original requisition or source document.  |
| Fund                      | 52-53              | Perpetuate from the original requisition or source document.  |
| Distribution              | 54-56              | Perpetuate from the original requisition or source document.  |
| Project                   | 57-59              | Perpetuate from the original requisition or source document.  |
| Priority                  | 60-61              | Perpetuate from the original requisition or source document.  |
| Required                  | 62-64              | Perpetuate from the original requisition or source document.  |
| Advice                    | 65-66              | Perpetuate from the original requisition or source document.  |
| Routing Identifier        | 67-69              | Perpetuate from the original requisition or source document.  |
| Management                | 70-73              | Perpetuate from the original requisition or source document.  |
| Unit Price                | 74-80              | Indicate the unit price of item being released. See Block 26.   |

## Instructions: Issue Release/Receipt Document DD Form 1348

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| BLOCK(S) | ENTRIES  |
|----------|--|
| 1        | Total price.   |
| 2        | DODAAC of shipping activity/DRMO. If reduced print is used, in-the-clear address may be entered in addition to the DODAAC.   |
| 3        | DODAAC of the activity to receive the shipment, if applicable. If reduced print is used, in-the-clear address may be entered in addition to the DODAAC.  |
| 4        | DODAAC of the MARK FOR recipient, if applicable. If reduced print is used, in-the-clear address may be entered in addition to the DODAAC.  |
| 5        | Document preparation date (enter numerical day of year).   |
| 6        | National Motor Freight Classification Commodity Number.  |
| 7        | Freight rate for the shipment.   |
| 8        | Type of cargo code (see DoD MILSTAMP, DoD 4500.32-R, Vol. 1).  |
| 9        | Enter applicable controlled inventory item code which describes the security/pilferage classification of the shipment from DoD 4100.39-M (FLIS Procedures Manual), volume 10, chapter 4. (Mandatory Entry) |
| 10       | Actual quantity received.  |
| 11       | Unit pack of item shipped.   |
| 12       | Unit weight of item shipped.   |
| 13       | Unit cube of item shipped.   |
| 14       | Uniform Freight Classification (UFC) Commodity Number.   |
| 15       | Shelf life of item shipped. (Mandatory Entry)  |
| 16       | Freight classification nomenclature.   |
| 17       | Item nomenclature.   |
| 18       | Type of container used for the shipment.   |
| 19       | Number of container that make up the shipment.   |
| 20       | Total weight of all containers that make up the shipment.  |



## Instructions: Issue Release/Receipt Document DD Form 1348

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- 21 Total cube of all containers that make up the shipment.
- 22 Received by, signature of receiver, or call sign/code if individual authorized access to the automated file.
- 23 Date received, date shipment was received.
- 24 Document Number - The document number assigned to the requisition. <sup>1</sup>
- Suffix Code - Blank if the document represents release of the total quantity requisitioned. If partial shipment, the appropriate suffix code assigned to indicate partial quantity released.
- 25 National Stock Number - Enter the stock or part number being released.
- Add - For subsistence items, enter the type of pack code in position 21.<sup>2</sup>

### FOR OTHER THAN FMS SHIPMENTS

- 26 Routing Identifier - The RI code of the shipping activity.
- Unit of Issue - The unit of issue of the stock or part number being released.
- Quantity - The quantity being released.

<sup>1</sup>Data will be prepared in two configurations; (1) three-of-nine bar code and (2) in the-clear. When prepared manually, bar code will not be included.

<sup>2</sup>See Footnote 1, above.

Condition Code - The supply condition code of material being released.

Distribution - Perpetuate from record positions 55 and 56.

Unit Price - The unit price for the NSN/part number being released. <sup>3</sup>

- 26 Unit of Issue - two positions - the unit of issue of the stock or part number being released.

Quantity - five positions - the quantity being released.

Condition - one position - the supply condition code of material being released.

## Instructions: Issue Release/Receipt Document DD Form 1348

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Unit Price - seven positions - the unit price for the NSN/  
part number being released.

Supplementary Address - the first position and last three  
positions of the supplementary address.

27

This block may contain additional data including bar coding  
for internal use. Data entered in this block is as required by  
shipping activity by commodity. When data is entered in  
this block, it will be clearly identified.

## Instructions: Requisition and Invoice/Shipping Document DD Form 1149

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*DoD 4161.2-M, December 1991*

### AP5. APPENDIX 5

#### INSTRUCTION FOR THE USE, COMPLETION, AND DISTRIBUTION OF DD FORM 1149, "REQUISITION AND INVOICE/SHIPPING DOCUMENT"

1. Use. The DD Form 1149 may be used for the following purposes (unless otherwise approved by the PA, CO, or contract):
  - a. Return of Government-Furnished Property (GFP) except for material obtained through the Military Standard Requisitioning and Issue Procedures (MILSTRIP) and Real Property. MILSTRIP material may be returned on DD Form 1348-1, as prescribed by DoD Manual 4000.25-1-M. Real Property will be transferred on DD Form 1354.
  - b. Shipment of Industrial Plant Equipment (IPE) controlled by the Defense Industrial Plant Equipment Center (DIPEC), Memphis, TN. (Use DD Form 1149 issued by DIPEC.)
  - c. Internal transfer of Government property accountability from one contract to another, with proper authorization; e.g., contract modification.
  - d. Shipment of Government Property to other contractors and subcontractors. DD Form 1149 may also be used for shipments to secondary locations of the prime contractor.
2. Preparation and Completion of DD Form 1149
  - a. The following information will be reflected in each appropriate block:
    - (1) From - Consignor (including contract number under which shipment is made).
    - (2) To - Consignee - Enter complete name. Do not abbreviate or use letter symbols.
    - (3) Ship to - Mark for - as indicated in the shipping instructions. Indicate contract number under which consignee will receive shipment, if furnished with shipping instruction.

## Instructions: Requisition and Invoice/Shipping Document DD Form 1149

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*DoD 4161.2-M, December 1991*

(4) Accounting and Funding Data - Cite applicable data if specified in the shipping or other instructions. For Item 4 leave blank in all other cases. Items (4a) through (4i) shall be completed in all instances.

(4a) Item No. - Numerical sequence of items being shipped or transferred.

(4b) National Stock Number, Description and Coding of Material and/or Services - enter data listed in applicable Federal catalogs. Use Manufacturer's part number and description if item is not listed in Federal catalogs and so indicate in the description. If applicable, include in this block a listing of all attachments and accessories.

(4c) Unit of issue - as appropriate.

(4d) Quantity requested - enter quantity requisitioned by consignee, if appropriate. If not applicable, leave blank.

(4e) Supply action - enter quantity being shipped or transferred.

(4f) Type container - carton, wooden or metal box, skid, etc.

(4g) Container Numbers. Number each container if more than one and indicate in this block the container numbers in which the particular item is located.

(4h) Unit price - cost of each individual item. Use estimate when cost is not available.

(4i) Total cost - Unit price multiplied by the total number of the applicable item shipped.

(5), (6), (7) and (8) (Requisition date, number, requirement and priority) - Leave blank unless such data are included in the shipping instructions.

(9) Authority or purpose - cite document, contract modification, or other Government directive, which authorized shipment or transfer.

(10) Signature - leave blank.



## Instructions: Requisition and Invoice/Shipping Document DD Form 1149

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*DoD 4161.2-M, December 1991*

(11a) Voucher number and date - enter number assigned by the shipping contractor or consignor to identify this shipping document and to credit his property account.

(11b) Indicate date the voucher number was assigned.

(12) Date shipped - enter date items are picked up by carrier. For in-place transfers, enter date transaction is completed.

(13) Mode of shipment - enter type of carrier used - railroad, commercial or Government truck, pick-up, commercial or Government aircraft.

(14) Bill of Lading number - enter the commercial or Government bill of lading number on which shipment is accomplished.

(15) Air Movement Designator or Port Reference No. - enter data when applicable.

(16) Transportation via MSTTS Chargeable to - Cite appropriate funds for these items as called for in shipping instructions. Leave blank if not applicable.

(17) Special handling - enter special handling requirement specified in the shipping instructions or required by the nature of the items shipped; i.e., "fragile," "do not drop," etc.

(18) Recapitulation of shipment - enter appropriate data only when shipments are of such magnitude and complexity that this information will be helpful in controlling shipment. This block may be left blank at the discretion of the Consignor.

(19) Receipt data - for use by consignee.

b. QAR verification When appropriate, the QAR will place a verification stamp or signature in block (4b) following the last line item entered. DD Form 1149C, "Requisition and Invoice/Shipping Document (Continuation sheet)" will be used if more than one page is required for a single shipment.

## Instructions: Requisition and Invoice/Shipping Document DD Form 1149

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### 3. Distribution

a. The DD Form 1149, as a minimum, will be distributed as follows:

Original - To Consignee w/shipment

1 Copy - Consignor

1 Copy - Mailed to consignee as advance copy

1 Copy - Attached to original copy of Bill of Lading

1 Copy - Attached to Transportation Office copy of GBL

1 Copy - Carrier

1 Copy - Quality Assurance Representative (QAR)

1 Copy - Plant Clearance Officer (PLCO) (if applicable)

1 Copy - Property Administrator (if required for information purposes)

b. Distribution should be reflected in the body of DD Form 1149 or 1149-1.

c. Classified shipments and documents will be marked and handled in accordance with existing security regulations.

## Instructions: DOD Property in the Custody of Contractors DD Form 1662

### REPORTING INSTRUCTIONS

**GENERAL.** The prime contractor shall report all DoD property (as indicated) in its custody or in that of its subcontractors as of September 30 to the Government Property Representative by October 31 of each year. Also report zero end of period balances when no DoD property remains accountable to the contract. Report data from records maintained in accordance with FAR Subpart 45.5 and DFARS Subpart 245.5.

**REPORT AS OF 30 SEP \_\_\_\_\_.** Fill in the appropriate year (*or other date*).

**ITEM 1 - TO.** Enter the name of the Government Property Representative, the Contract Administration Office or other office the Government Property Representative works for, and the full mailing address (*including City, State, and ZIP + 4*).

**ITEM 2 - FROM.** Enter the full name and address of the reporting contractor with the Division name stated after the Corporate name. Use the name as it appears on the contract but omit articles and insert spaces between company names that are made up of letters like XYZ Inc., for example. Also enter the Commercial and Government Entity (CAGE) Code.

**ITEM 3 - IF GOVERNMENT-OWNED CONTRACTOR-OPERATED PLANT, ENTER GOVERNMENT NAME OF PLANT.** Enter the Government name of the plant if the plant is Government-owned and Contractor-operated. Leave blank if it is a contractor-owned plant.

**ITEM 4 - CONTRACT NO. (PIIN).** Enter the 13-digit contract number or Procurement Instrument Identification Number (PIIN) under which the Government property is accountable. Use format XXXXXX-XX-X-XXXX.

**ITEM 5 - CONTRACT PURPOSE.** Enter one of the following 1-character alphabetic codes to identify the general purposes of the contract:

- A. RDT&E
- B. Supplies and Equipment (*deliverable end items*)
- C. Facilities Contract
- D. Lease of facilities by the contractor
- E. Maintenance, Repair, Modification, or Rebuilding of Equipment
- F. Operation of Government-Owned Plant or Facilities including test sites, ranges, installations
- G. Service contract performed primarily on Military Installations, test facilities, ranges or sites
- H. Contract for storage of Government Property
- I. Others

**ITEM 6 - BUSINESS TYPE.** Enter a 1-character alphabetic code indicating the type of business concern:

L = Large            S = Small            N = Non-profit

(*See FAR Part 19 for definition of Small Business and FAR 31.701 for definition of Non-profit Organizations.*)

**ITEM 7 - OFFICIAL NAME OF PARENT COMPANY.** Enter the name of the Parent Corporation of the Reporting Contractor. The Parent Corporation is one in which common stock has been issued whether or not the stock is publicly traded and which is not a subsidiary of another corporation.

**ITEM 8 - PROPERTY LOCATION(S).** Enter the primary location(s) of the property if it is located at site(s) other than that of the Reporting Contractor, e.g., location of subcontract property or property at alternate sites of the prime contractor. Location is the City, State and Zip or the Military Installation or the Foreign site. Limit input to 69 characters. NOTE: Can be used as a "REMARKS" field.

**ITEM 9 - PLANT EQUIPMENT PACKAGE.** Enter the Number and Use of a Plant Equipment Package (PEP) if one exists on this contract. Leave blank otherwise. Example: ARMY PEP #570 - 81 mm Shells.

**ITEMS 10 - 18.b.(1) - ACQUISITION COST (BALANCE AT THE BEGINNING OF THE FISCAL YEAR).** Enter the acquisition cost for each type of property as defined in FAR 45.5 or DFARS 245.5. The amounts reported must agree with the amounts reported in the previous year for BALANCE AT END OF PERIOD.

**ITEMS 10, 12 - 16.b.(2) - QUANTITY (BALANCE AT BEGINNING OF THE FISCAL YEAR).** Enter the quantity for all categories of Government property except for Other Real Property and Material on hand at the beginning of the fiscal year. The amounts reported must agree with the amounts reported in the previous year for BALANCE AT END OF PERIOD.

**ITEMS 10 - 15.c. - ADDITIONS (*in dollars*).** For the property categories indicated, enter the acquisition cost for the total additions to the contract from any source during the fiscal year. Do not enter for Government Material or Military Property.

**ITEMS 10 - 15.d. - DELETIONS (*in dollars*).** For the property categories indicated, enter the acquisition cost for the total deletions from the contract during the fiscal year. Do not enter for Government Material or Military Property.

**ITEMS 10 - 18.e.(1) - ACQUISITION COST (BALANCE AT THE END OF THE FISCAL YEAR).** Enter the acquisition cost for each type of property as defined in FAR 45.5 or DFARS 245.5.

**ITEMS 10, 12-16.e.(2) - QUANTITY (BALANCE AT END OF FISCAL YEAR).** Enter the quantity for all categories of Government Property except for Other Real Property and Material on hand at the end of the fiscal year. These will be carried forward to reflect the balance at the beginning of the following year.

**ITEMS 17 and 18 - GOVERNMENT MATERIAL.** Report material as reflected on inventory records in accordance with FAR 45.505-3.

**ITEM 19 - CONTRACTOR REPRESENTATIVE.** Type the name of the contractor representative authorized by the property control system to sign this report.

**ITEM 20 - DOD PROPERTY REPRESENTATIVE.** Type the name of the DoD Property Administrator or other Authorized Property Representative, plus that individual's commercial area code and telephone number and DSN number (*if one exists*). Signature and date.

**NOTE TO CONTRACTOR:** When reporting more than one contract from the same location and the same contractor, you may elect to fill out Data Elements 1, 3, 6, 7, and 19 only once as long as each form can be readily identified if any form becomes separated from the others.

DD FORM 1662 (BACK), JUN 2003

## Instructions: Consolidated Memorandum of Receipt (CMR)

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b. CMR Format.

(1) Header Information:

(a) Date and Time Report Printed. Shows the date and time that the report was generated.

(b) Subordinate Unit Code (SUC). A Subordinate/Responsible Unit (SU/RU) is defined as a customer of the using unit. They should represent a specific area of operation within the organization and should be established based on the mission of the unit. These units will be identified by up to a five-digit alpha-numeric Subordinate Unit Code (e.g., YMotor, YEng, YComm).

(c) Name. This field will be populated with the name of the Responsible Officer assigned to that specific CMR. The Responsible Officer (RO) is an individual within the organization appointed, in writing, by the Commanding Officer (CO) to exercise custody, care, and safekeeping of all property entrusted to the RO's possession or supervision. Each Subordinate Unit will have an RO appointed to oversee its CMR.

(d) EXP DT DEP. This is the expected departure date that the RO will be relieved of his/her duties.

(e) DATE LAST INV. This is the date the last inventory was conducted on that account.

(f) LOCAL TEL. This is the telephone number where the RO can be reached.

(g) AUTOVON TEL. This is the Defense Switched Network (DSN) number that is used in the military telephone system where the RO can be reached.

(h) TAMCN. TAMCN of the specific item.

(i) RNSN. Record NSN for that particular TAMCN.

(j) NOMENCLATURE. Provides a description of the item.

(k) U/I CD. Unit of Issue.

(l) O/H. Total on-hand quantity for the TAMCN.



## Instructions: Consolidated Memorandum of Receipt (CMR)

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(m) ALW. Allowance quantity by NSN for this specific CMR account.

(n) UNIT PRICE. Provides the unit price for the item listed.

(o) SAC. Stores Account Code.

(p) CIC. Controlled Item Code (if applicable).

(q) Serial Number(s) Found. Number of serial numbers and the actual serial number(s) for that item.

(r) TAM TOTAL. Relists the applicable TAMCN.

(s) OH TOT. Total quantity on-hand for that particular TAMCN.

(t) ALW TOT. Total allowance quantity for that particular TAMCN.

### 2. RESPONSIBLE OFFICER (RO).

a. The CO will appoint in writing an RO to assume responsibility for assets within each SU/RU. The RO should be an individual having administrative command and/or control over all personnel who will use the assigned equipment. ROs will not be assigned equipment or supplies used outside their span of control. If an RO is to be separated from the assets for 60 days or more, another RO must be appointed in writing for that account.

b. Responsibilities. ROs are custody holders of accountable assets. They are formally charged with the duty to care for and control all assets within their custody. ROs will ensure the following supply management principles are applied:

(1) Receipt for all on hand equipment.

(2) Maintain assigned equipment in a ready-for-use and serviceable condition.

(3) Account for equipment issued or sub-custodial and maintain a record of custody for such equipment.

## Instructions: Consolidated Memorandum of Receipt (CMR)

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(4) Report changes to the supply officer within 15 calendar days. Additionally, a new RO will be appointed, in writing, by the CO when the RO is separated from assets for more than 60 days.

(5) Request necessary investigative action in writing, for equipment abuse, gains, or losses, via the supply officer, to the Commander. (Additional guidance on investigations is provided in chapter 6 of MCO P4400.150\_).

(6) Conduct quarterly CMR reconciliations with the supply section. This requirement may be semi-annual if approved in writing by the unit CO.

(7) Conduct periodic inventories, at least annually, for all equipment assigned to the account. The annual inventory should coincide with one of the quarterly CMR reconciliations.

(8) In those cases where an RO uses CMRs to sub-custodial equipment for which the RO is responsible, the RO will appoint in writing a Responsible Individual (RI). CMRs and CMR records will be maintained per guidance contained in the UM 4400-124.

c. **Appointment Letter.** RO appointment letters and endorsements (RO acceptance letter) will be maintained by the supply office for one year after the RO ceases to serve and then destroyed.

(1) There is no format provided in creating an appointment letter; however, at a minimum, the guidelines contained in UM 4400-124, pages 3-2-8 (para. 2.5.b), should be incorporated. The Battalion Supply Officer is responsible for creating the appointment letter for the CO's signature. **The appointment letter cannot be signed "By direction".**

(2) **Endorsement.** The RO is required to formally accept the account by endorsing the appointment letter from the CO within 15 calendar days after being appointed.

(3) **Delegation of Authority Letter.** The RO may designate individuals to sign for equipment and supplies in his/her absence. This is done in writing with the original letter provided to the Supply Officer. This letter should be updated quarterly or each time the RO conducts his/her CMR reconciliation. **Reference UM 4400-15 pg. 3-26.**

## Instructions: Consolidated Memorandum of Receipt (CMR)

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### 3. RECONCILIATION OF AUTHORIZED QUANTITIES.

a. General. Authorized quantities specified on the T/E and the MAL are mandatory allowances. Therefore, it is essential that the authorized quantities on all CMRs are equal to the authorized quantities on the T/E and MAL. The CO has the prerogative to authorize realignment of assets based on mission requirements.

b. Procedures. Local SOP will dictate the procedures to reconcile authorized quantities. It is important to know that to verify authorized quantities you will need the T/E (for the individual companies) and the MAL.

### 4. INTERIM RECEIPT.

a. General. Any item that is issued or received by a RO will have an effect on his/her CMR. Therefore, it is important to have an audit trail. This audit trail is accomplished by the use of an interim receipt (DD Form 1348-1a). When the RO orders a piece of equipment and supply receives it, arrangements will be made for delivery or pick up. The RO may designate one or more individuals as authorized representatives; however, a delegation of authority letter will be made in writing and signed by the RO concerned. The original copy of the letter delegating this authority will be given to the unit Supply Officer. A signature must be obtained on the DD Form 1348-1a before the item can change hands. This covers both an issue to the RO or a turn-in from the RO.

b. Necessary Information. There is mandatory information that must be listed on the interim receipt for processing.

(1) From. The issuing unit. (Battalion Supply or the Subordinate Unit Code)

(2) To. Who the gear is going to. (Subordinate Unit Code or Battalion Supply)

(3) National Stock Number. NSN of the item being received, turned in, or transferred.

(4) Unit of Issue. Unit of Issue of the item.

(5) Quantity. Quantity being received, turned in, or transferred. You should always check the quantity to ensure it is equal to the quantity you are signing for.

## Instructions: Consolidated Memorandum of Receipt (CMR)

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(6) Nomenclature. General description of the item.

(7) Serial Number(s). Serial numbers of the items being received, turned in, or transferred. You should always visually check the serial number(s) on the equipment for correctness.

(8) Signature. You **MUST** ensure you get the receiving person's signature. Have the person sign and print their names, rank and receiving date.

c. Distribution. The receiving person will keep a copy of the interim receipt, and the original will go to the issuing person. These receipts will be placed in the CMR folder. The RO and supply will both maintain folders for reconciliation purposes, which will be covered later in this class.

### 5. RECONCILIATION OF THE CMR.

a. General. Quarterly, or upon change of the RO, reconciliation will be conducted between the RO and the supply office. A semi-annual vice quarterly reconciliation is authorized when approved in writing by the unit CO. **Reference UM 4400-124, pg. 3-2-8. The following information will also be found on this page.**

b. Quarterly Reconciliation. Once a quarter, or upon change of RO, the Supply Officer will forward the RO an update cover letter and two copies of the CMR directing the reconciliation. The RO has 15 calendar days from the date of the letter to reconcile the account. The RO will verify all quantities and serial numbers and return the signed copy of the new CMR to the Supply Officer. The bottom of each page will be initialed with the last page signed and dated. ROs must ensure their records are maintained current on a day-to-day basis. The ROs copy of the CMR will be updated in **PENCIL**, when required.

c. Discrepancies. If discrepancies are noted by the RO, the differences will be reconciled by the RO providing the Supply Officer with any and all supporting documentation.

(1) If the Supply Officer agrees with the RO, the change will be made to the CMR in **PEN** and initialed by the RO and Supply Officer.



## Instructions: Consolidated Memorandum of Receipt (CMR)

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(2) The RO Will Report all Discrepancies that Exist Between the CMR and what is Actually On-Hand. These discrepancies must be reported in writing to the CO, via the Supply Officer, as a request for investigation as appropriate. Discrepancies reported to the CO will include variances in NSN, quantity, or serial number for items in the following categories:

- (a) Controlled items regardless of dollar value.
- (b) Nonexpendable un-serialized property with an extended dollar value of \$2,500 or more.
- (c) Serialized non-controlled property with an extended dollar value of \$800 or more.

(3) Items Not Meeting the Criteria Listed Above Will Also be Reported, in Writing, by the RO to the CO Via the Supply Officer for Resolution. The Supply Officer is authorized, unless the CO states otherwise, to approve adjustments without prior approval once all causative research has been completed. The Supply Officer will identify on the endorsement, by TAMCN/NSN, whether an investigation is or is not warranted. For those items in which the Supply Officer has authorized the adjustment to the records, he will identify the corrective action taken on the endorsement. This endorsement will also identify the results of the causative research that was conducted:

- (a) The circumstances of the variance must be fully stated by the RO.
- (b) When the variance is due to a physical loss, the RO should state whether the individual responsible is willing to reimburse the government for all or part of the loss.
- (c) Discrepancies must be reported even though the variance may be clearly administrative in nature.
- (d) The Supply Officer's endorsement should clarify any ambiguities in the RO's original Request for Investigation. This endorsement is also an opportunity for the Supply Officer to make recommendations to the CO.

(4) Even though the RO disputes the quantities on the CMR, he/she will still sign the CMR certifying it to be correct.

## Instructions: Consolidated Memorandum of Receipt (CMR)

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### 7. CMR INVENTORIES.

a. Physical inventory of all assets on a RO's CMR is required annually or upon a change of RO. The physical inventory should be directed by the Supply Officer to coincide with an annual (wall-to-wall) inventory of the Battalion account.

b. Serial Number Reconciliation. For serialized items, the TOTAL SERIAL #S quantity should match the CMR OH quantity and the MAL O/H quantity unless there is an on-hand quantity being maintained in the supply warehouse or section.

c. In order to perpetuate a smooth and efficient accounting system for our allowance items, daily maintenance of the CMR and maintaining required files, listings, and supporting documentation is imperative.

d. The Manufacturer/USMC serial numbers, for which the RO is responsible, will be recorded on all copies of the CMR's.

e. CMR Pending File. This file is maintained and contains all adjustment transactions, which have not yet processed. Every change must have supporting documentation.

f. Delegation of Authority Letters. Responsible Officers may designate one or more individuals as their authorized representatives to receipt for and requisition supplies; however, Delegation of Authority letters will be made, in writing, and signed by the RO concerned. The original delegation of authority letter will be held by the Supply Officer, and maintained on file for a period of one year after the relief of the RO, or until a new delegation of authority letter is submitted.

Instructions: Consolidated Memorandum of Receipt (CMR)

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**REFERENCES :**

**REFERENCE#**

|   |                |
|---|----------------|
| Consumer-Level Supply Policy Manual<br>(Jun 99) | MCO P4400.150E |
| MIMMS Field Procedures Manual (Jul 94)          | MCO P4790.2C   |
| SASSY Using Unit Procedures                     | UM 4400-124    |
| Unit's Standing Operating Procedures            | UNIT SOP       |
| Unit's Table of Organization and Equipment      | UNIT T/O&E     |

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## Instructions: DD Form 577 Appointment/Termination Record-Authorized Signature

| <b>APPOINTMENT/TERMINATION RECORD - AUTHORIZED SIGNATURE</b><br><i>(Read Privacy Act Statement and Instructions before completing form.)</i>   |   |                               |
|--|---|-------------------------------|
| <b>PRIVACY ACT STATEMENT</b><br><b>AUTHORITY:</b> E.O. 9397, 31 U.S.C. Sections 3325, 3525, DoDFMR, 7000.14-R, Vol. 5.<br><b>PRINCIPAL PURPOSE(S):</b> To maintain a record of certifying and accountable officers' appointments, and termination of those appointments. The information will also be used for identification purposes associated with certification of documents and/or liability of public records and funds.<br><b>ROUTINE USE(S):</b> The information on this form may be disclosed as generally permitted under 5 U.S.C Section 552a(b) of the Privacy Act of 1974, as amended. It may also be disclosed outside of the Department of Defense (DoD) to the the Federal Reserve banks to verify authority of the accountable individual to issue Treasury checks. In addition, other Federal, State and local government agencies, which have identified a need to know, may obtain this information for the purpose(s) identified in the DoD Blanket Routine Uses published in the Federal Register.<br><b>DISCLOSURE:</b> Voluntary; however, failure to provide the requested information may preclude appointment. |   |                               |
| <b>SECTION I - FROM: APPOINTING AUTHORITY</b>  |   |                               |
| 1. NAME <i>(First, Middle Initial, Last)</i>   | 2. TITLE  | 3. DOD COMPONENT/ORGANIZATION |
| 4. DATE <i>(YYYYMMDD)</i>  | 5. SIGNATURE  |                               |
| <b>SECTION II - TO: APPOINTEE</b>  |   |                               |
| 6. NAME <i>(First, Middle Initial, Last)</i>   | 7. SSN  | 8. TITLE                      |
| 9. DOD COMPONENT/ORGANIZATION  | 10. ADDRESS <i>(Include ZIP Code)</i>               |                               |
| 11. TELEPHONE NUMBER <i>(Include Area Code)</i>  | 12. EFFECTIVE DATE OF APPOINTMENT <i>(YYYYMMDD)</i> |                               |
| <b>13. POSITION TO WHICH APPOINTED</b> <i>(X as applicable (one only))</i><br><input type="checkbox"/> DISBURSING OFFICER <input type="checkbox"/> DEPUTY DISBURSING OFFICER <input type="checkbox"/> DISBURSING AGENT<br><input type="checkbox"/> PAYING AGENT <input type="checkbox"/> CASHIER <input type="checkbox"/> COLLECTION AGENT<br><input type="checkbox"/> CHANGE FUND CUSTODIAN <input type="checkbox"/> IMPREST FUND CASHIER <input type="checkbox"/> CERTIFYING OFFICER<br><input type="checkbox"/> DEPARTMENTAL ACCOUNTABLE OFFICIAL   |   |                               |
| <b>14. YOU ARE HEREBY APPOINTED TO SERVE IN THE CAPACITY IDENTIFIED IN ITEM 13. YOUR RESPONSIBILITIES INCLUDE:</b><br><br>   |   |                               |
| <b>15. YOU ARE ADVISED TO REVIEW AND ADHERE TO THE FOLLOWING REGULATION(S) NEEDED TO ADEQUATELY PERFORM THE DUTIES TO WHICH YOU HAVE BEEN ASSIGNED:</b><br><br>  |   |                               |
| <b>SECTION III - ACKNOWLEDGEMENT OF APPOINTMENT</b>  |   |                               |
| I acknowledge and accept the position and responsibilities defined above. I understand that I am strictly liable to the United States for all public funds under my control. I have been counseled on my pecuniary liability and have been given written operating instructions. I certify that my official signature is shown in item 17 below.   |   |                               |
| 16. PRINTED NAME <i>(First, Middle Initial, Last)</i>  | 17. SIGNATURE                                       |                               |
| <b>SECTION IV - TERMINATION OF APPOINTMENT</b>   |   |                               |
| The appointment of the individual named above is hereby revoked.   |   | 18. DATE <i>(YYYYMMDD)</i>    |
| 19. APPOINTEE INITIALS   |   |                               |
| 20. NAME OF APPOINTING AUTHORITY   | 21. TITLE   | 22. SIGNATURE                 |



## Appendix C - Tier 2 KSDs

The following are examples of alternative supporting documentation that may fulfill financial statement assertions:

- Contract modifications, or change orders
- Approved work order
- Approved last invoice
- Signed lease for leased property
- Transfer letter and documents for transferred assets
- DoD Property in the Custody of Contractors (DD Form 1662)
- Selected Acquisition Report (SAR)
- Valuation Data Report with Program Listing
- Budget Item Justification Sheet (Exhibit P-40, DD Form 2454, Exhibit R-2)
- Production Schedule (Exhibit P-21, DD Form 2445)
- Cost Analysis Worksheet (P-5)
- Budget Procurement History and Planning (Exhibit P-5a, DD Form 2446)
- Procurement Program (Exhibit P-1)
- Appropriation Bill Report
- Extracts from Accounting Systems Supporting Data

Tier 2 KSDs are expected to be maintained just as Tier 1 KSDs to support a Financial statement audit.

