# WASHINGTON HEADQUARTERS SERVICES
# SIGNATURE AUTHORIZATION TO REQUEST AND/OR RECEIVE SUPPLIES AND/OR EQUIPMENT

| **1. ORGANIZATION RECEIVING SUPPLIES/EQUIPMENT** | **2. DATE** *(YYYYMMDD)* | **3. LOCATION** |
|---|---|---|
| | | |

**4. AUTHORITY**

| a. NAME *(Last, First, Middle Initial)* | b. REQUEST/RECEIVE *(X as appropriate)* | | c. SIGNATURE |
|---|---|---|---|
| | **REQ** | **REC** | |
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| **5. NAME OF PERSON GRANTING AUTHORITY** *(Last, First, Middle Initial)* | **6. EXPIRATION DATE** *(YYYYMMDD)* | **7. SIGNATURE** |
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