

REQUEST FOR TECHNICAL ASSISTANCE			1. DATE		
TO: Directorate of Technical Operations		FROM: Directorate of Supply Operations		2. SERIAL NUMBER	
3. REQUISITIONER			3a. REQUISITION NUMBER		
4. NATIONAL STOCK NUMBER			5. MANUFACTURER'S CODE AND PART NUMBER		
6. NOMENCLATURE/NOUN					
7. TYPE OF INFORMATION REQUESTED			8. ANSWER REQUIRED BY		
<input type="checkbox"/> ITEM DESCRIPTION <input type="checkbox"/> SUBSTITUTE ITEM <input type="checkbox"/> END ITEM APPLICATION <input type="checkbox"/> STATUS OF TECHNICAL REVIEW			TIME	DATE	
ITEMS 9 AND 10 FOR USE BY TECHNICAL OPERATIONS ONLY					
9. EXTENT OF RESEARCH					
<input type="checkbox"/> TECH DATA AVAILABLE <input type="checkbox"/> OFF CENTER					
10. REMARKS AND/OR COMMENTS					
11. SIGNATURE OF ESOC PROJECT OFFICER		11a. TEL. EXT.	12. SIGNATURE OF TECHNICIAN		12a. TEL. EXT.