STATE OF NEW YORK

1122 DA/DLA Authorization Request Form

(DA / DLA Stock Items Only)

1122B (New O6-15)

Date _____

- ◯ **Counter-Drug**
- ◯ **Homeland Security**
- ◯ **Emergency Response**

Source of Supply (SOS)

- ◯ **B17**
- ◯ **A12**
- ◯ **SMS**

Ordering Agency

Agency Name: _____ Agency #: _____

POC: _____ E-Mail _____

Phone #: _____ Cell #: _____ Fax #: _____

Ship to

Agency Name: _____

Address: _____

City: _____ Zip: _____

POC: _____

Justification

NSN # *DHS-AEL #	Item Description	Quantity	Unit Price	Cost	Retail Price	Savings	%Saved
– – – – – – – – – –				$0.00		$0.00	0.00%
– – – – – – – – – –				$0.00		$0.00	0.00%
– – – – – – – – – –				$0.00		$0.00	0.00%
– – – – – – – – – –				$0.00		$0.00	0.00%
– – – – – – – – – –				$0.00		$0.00	0.00%
– – – – – – – – – –				$0.00		$0.00	0.00%
– – – – – – – – – –				$0.00		$0.00	0.00%
– – – – – – – – – –				$0.00		$0.00	0.00%
– – – – – – – – – –				$0.00		$0.00	0.00%
– – – – – – – – – –				$0.00		$0.00	0.00%
				$0.00		$0.00	0.00%
					Order Total		

Submission of this form acknowledges my express authority to approve purchases for equipment/supplies on behalf of the requesting entity, the items requested herein are fully funded and all necessary internal approvals have been received
Please submit this form via email to: ny1122.spoc@ogs.ny.gov

* *DHS - AEL # - Department of Homeland Security, Authorized Equipment List Number (For Homeland Security Only)*