Department of Health and Human Services
Office of the Secretary

Micro-Purchase Service Request

REQUEST DATE *(mm/dd/yyyy)*	ORDER REF. NUMBER
OFFICE	

REQUESTOR NAME	**NAME OF ALTERNATE**
BUILDING / ROOM NUMBER	BUILDING / ROOM NUMBER
PHONE NUMBER	PHONE NUMBER
EMAIL ADDRESS	EMAIL ADDRESS

SERVICE REQUEST TYPE *(Please check applicable item.)*

- ☐ Purchase – Cell Phone
- ☐ Purchase – Office Supplies
- ☐ Purchase – Furniture
- ☐ Purchase – Equipment
- ☐ Purchase – Publication / Subscription / Periodical / On-Line Service
- ☐ Purchase – Ergonomics / Accommodations
- ☐ Training
- ☐ Purchase – Other: _____

VENDOR

SERVICE REQUEST DESCRIPTION / JUSTIFICATION OF NEED *(Be specific.)*

DATE REQUIRED *(mm/dd/yyyy)*	**DOLLAR LIMIT**	

STAFFDIV – APPROVED BY		**POINT OF CONTACT**	
Name	Date *(mm/dd/yyyy)*	Name	Date *(mm/dd/yyyy)*
Signature		Signature	

FUNDS CERTIFICATION

Name	Date *(mm/dd/yyyy)*	CAN Number	Object Class	Appropriation Number
Signature				

PURCHASE CARD HOLDER

Name	Date *(mm/dd/yyyy)*	Purchase Card Number *(Last 5 digits)*
Signature		

PURCHASE CARD APPROVAL		**IT APPROVAL** *(If applicable)*	
Name	Date *(mm/dd/yyyy)*	Name	Date *(mm/dd/yyyy)*
Signature		Signature	

PSC Publishing Services (301) 443-6740 EF

Micro-Purchase Service Request

PURCHASE/SERVICE REQUESTED

Item Description / Number	Quantity	Unit of Issue	Unit Cost	Total Cost
				$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
			TOTAL	**$0.00**

RECOMMENDED SOURCE(S)	**DELIVERY DESTINATION ADDRESS**
Vendor Name and Address	
Vendor Phone Number	
Contact Name	
GSA or Other Contact Number	

Justification for Sole Source

Sensitive Government Property

Is the property classified as sensitive government property, under the HHS Sensitive Items Policy or under any more restrictive OPDIV/STAFFDIV Policy?

☐ Yes ☐ No

If the property is sensitive, has the appropriate Property Manager been informed to enter the property into the PMIS?

☐ Yes ☐ No ☐ NA

If applicable, what is the date the Property Manager entered the property into PMIS?

Date Entered into PMIS: ☐ NA