



# (SAMPLE FORMAT)

<b>NOTICE OF DELEGATION OF AUTHORITY - RECEIPT FOR SUPPLIES</b> <i>For use of this form, see DA PAM 710-2-1. The proponent agency is ODCSLOG.</i>					DATE 7 JUN 00	
<b>AUTHORIZED REPRESENTATIVE(S)</b>						
ORGANIZATION RECEIVING SUPPLIES 411TH BSB TRAINING SUPPORT CENTER				LOCATION HEIDELBERG		
LAST NAME-FIRST NAME-MIDDLE INITIAL		SOCIAL SECURITY NUMBER		AUTHORITY		SIGNATURE AND INITIALS
				REQ    REC		
SUTHERLAND, PATRICK				Y    Y		
CROWDER, HAROLD				Y    Y		
NOTHING FOLLOWS						
<b>AUTHORIZATION BY RESPONSIBLE SUPPLY OFFICER OR ACCOUNTABLE OFFICER</b>						
THE UNDERSIGNED HEREBY <input checked="" type="checkbox"/> DELEGATES TO <input type="checkbox"/> WITHDRAWS FROM    THE PERSON(S) LISTED ABOVE, THE AUTHORITY TO: <b>REQUEST, RECEIVE AND TURN IN EQUIPMENT</b>						
REMARKS						
<b>I ASSUME FULL RESPONSIBILITY</b>						
UNIT IDENTIFICATION CODE				DODAAC/ACCOUNT NUMBER		
LAST NAME-FIRST NAME-MIDDLE INITIAL		GRADE	TELEPHONE NUMBER	EXPIRATION DATE	SIGNATURE	
GEORGE E. RODRIGUEZ		GS-	373-6534	6 JUN 01		