

NOAA FORM 41-1 (10/2023)		U.S. DEPARTMENT OF COMMERCE NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION		REQUISITION NUMBER (To be assigned by FOD)
REQUEST FOR OFFICE SERVICES				
FROM: ORIGINATING OFFICE		DATE OF REQUEST		DATE SERVICES REQUIRED
REQUESTOR INFORMATION				
NAME	TELE NUM. + EXT.	BUILDING	ROOM NUMBER	
ORGANIZATION CODE ("14" + 16 digits)  14		PROJECT/TASK CODE (15 char)		
OFFICE SERVICE INFORMATION				
BUILDING (WHERE SERVICES WILL BE PERFORMED)		ROOM NUMBER (WHERE SERVICES WILL BE PERFORMED)		
DESCRIPTION OF SERVICES REQUIRED AND LOCATION *				
* include the point of contact if other than the requestor				
APPROVAL (Signature of official authorized to approve the expenditure of funds)				DATE
FOR FOD USE ONLY				
DATE RECEIVED		COMPLETION DATE		
WORK ORDER CODE		MAN HOURS		