

COMMUNICATION SERVICE AUTHORIZATION

1. AUTHORIZATION		2. AUTHORIZATION		3. CIRCUIT OR BILL NUMBER			
a. NUMBER	b. DATE (YYYYMMDD)	a. NUMBER	b. DATE (YYYYMMDD)				
4. FROM <i>(Include ZIP Code)</i>			5. SUBMIT BILLS FOR CERTIFICATION TO <i>(Include ZIP Code)</i>				
6. TO <i>(Communications Company)</i>			7. TELEPHONE NUMBER TO CONTACT FOR DETAILS <i>(Include Area Code)</i>				
a. COMPANY NAME			8. AUTHORIZATION. In accordance with provisions of the contract indicated above of which this authorization forms a part, authority is hereby given to Communications Company indicated in Item 6 to establish or perform services for official use as prescribed below at:				
b. ADDRESS							
(1) STREET							
(2) CITY	(3) STATE	(4) ZIP CODE					
9. SERVICE(S)							
DESCRIPTION a.				NUMBER b.	NON-RECURRING CHARGE c.	d. RATE PER MONTH	
						PER UNIT (1)	TOTAL (2)
10. DISBURSING OFFICER MAKING PAYMENT				11. DISTRIBUTION		a. NAME <i>(Last, First, Middle Initial)</i>	
						b. GRADE	
						12. AUTHORIZING OFFICIAL	
a. SIGNATURE							
b. TITLE		c. GRADE					
13. ACCEPTANCE							
a. NAME OF CONTRACTING FIRM		b. SIGNATURE OF CONTRACTOR'S REPRESENTATIVE		c. DATE SIGNED <i>(YYYYMMDD)</i>			