

DATA ITEM TRANSMITTAL/ACCEPTANCE/REJECTION FORM

Contract W900KK-_____

CLIN/ELIN: _____/_____ TITLE: _____
Block 14 Distribution: _____
Other: _____ EFTNP wo dgt

Doc. Ref. No.: _____ Date: _____

From:

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"
"

To: U.S. Army Contracting Command - Orlando
12211 Science Drive,
Orlando, FL 32826-3224
ATTN: _____

The above detailed CDRL item is forwarded for review and acceptance/ rejection. This item is due ____ a ____,
Government review period is ____ days.

Signature:

Typed Name/Title: _____

FIRST ENDORSEMENT: Date Received:

- Accepted.
- Accepted. Attached comments must be incorporated into the next scheduled submission. (This block is for use with periodically submitted items only.)
- Rejected, comments attached. Change pages are not sufficient for correction. Contractor is allowed 30 days or __ days to resubmit.

Signature:

Typed Name/Title: _____ Date: _____

VIA: Date:

VIA: PD____ Date:

SECOND ENDORSEMENT:

- Accepted.
- Accepted conditionally. Attached comments must be incorporated in the next scheduled submission.
- Rejected, comments attached. Resubmit no later than _____

Signature:

Typed Name/Title: _____ Date: _____
Contracting Officer

CC w/Encl.:

CC w/o Encl.: