

TELEPHONE SERVICE REQUEST

SECTION I - (TO BE COMPLETED BY GSA)

Please perform all work outlined below and invoice in accordance with published tariff.

SERVING TELEPHONE COMPANY	DOC. I.D.	SYSTEM I.D.	ORDER NUMBER	PAGE NO.
	TSR			
AUTHORIZED SIGNATURE, TELEPHONE NUMBER AND LOCATION				DATE SIGNED

SECTION II - (TO BE COMPLETED BY REQUESTING AGENCY)

AGENCY NAME			WORK SITE		PERSON TO CONTACT	
SEQUENCE NUMBER	CUSTOMER NUMBER	AGENCY ORDER NUMBER	LOCATION CODE	SERVICE REQUEST DATE	We hereby request GSA to have the work performed as indicated below.	
00					AUTHORIZED SIGNATURE	DATE SIGNED

SPECIAL INSTRUCTIONS

LINE NO.	ACTION CODE	QTY.	VENDOR CODE	DESCRIPTION
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SECTION III - (TO BE COMPLETED BY SERVING TELEPHONE COMPANY)

NON-RECURRING CHARGE	EFFECTIVE BILLING DATE	The above work was completed by the date indicated.	SIGNATURE AND TELEPHONE NUMBER	DATE SIGNED
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