

# NFES ITEM INTRODUCTION FORM

NFES NUMBER: \_\_\_\_\_

DESCRIPTION: \_\_\_\_\_  
\_\_\_\_\_

UNIT OF ISSUE: \_\_\_\_\_ STD PK: \_\_\_\_\_ ITEM COST: \_\_\_\_\_

LBS: \_\_\_\_\_ OZS: \_\_\_\_\_ SHELF LIFE: \_\_\_\_\_ MSDS \_\_\_\_\_ (attach info)

KIT ITEM: Y / N HAZ MAT: Y / N (if yes, attach hazardous material information)

CONSUMABLE / DURABLE (circle one)

REFURB ITEM: Y / N (if yes, attach refurb information)

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## ***SOURCE OF SUPPLY: (federal source of supply requires NSN)***

VENDOR: \_\_\_\_\_ VENDOR: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

PHONE: \_\_\_\_\_ PHONE: \_\_\_\_\_

FAX: \_\_\_\_\_ FAX: \_\_\_\_\_

VENDOR ITEM #: \_\_\_\_\_ VENDOR ITEM #: \_\_\_\_\_

NSN: \_\_\_\_\_ NSN: \_\_\_\_\_

ADDITIONAL ITEM COMMENTS: \_\_\_\_\_  
\_\_\_\_\_

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REQUESTED BY: \_\_\_\_\_ CACHE: \_\_\_\_\_ DATE: \_\_\_\_\_

NFES NUMBER ASSIGNED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

NFES CHAIRPERSON: \_\_\_\_\_ DATE: \_\_\_\_\_