

SERVMART SHOPPING LIST (4481)
NAVSUP FORM 1314 (REV. 4-84)
 SN 8108-LF-901-3142

MATERIAL CATEGORY _____ PAGE _____ OF _____ JULIAN DATE _____

SHIP/ACTIVITY		REQUISITION NO.					FUND CODE
ITEM NO.	COG SYN AND NSN	DESCRIPTION	WT	QTY	UNIT PRICE	EXTENSION	REQUIRING DEPT.
1							
2							
3							
4							
5							
6							
7							
8							
9							
0							
1							
2							
3							
4							
5							

TYPED OR PRINTED NAME AND RANK OR GRADE OF AUTHORIZED SHOPPER _____

DISTRIBUTION: WHITE - Shopper's Copy, YELLOW - Mail to Ship/Activity, PINK - Store's Copy (Optional), GOLD - Supply Officer's Copy

I CERTIFY THAT THE PURCHASE OF MATERIALS LISTED HEREON IS NECESSARY FOR THE OFFICIAL BUSINESS OF THE NAVY, REQUESTED BY (FOR DIRECT TURNOVER MATERIAL): _____ APPROVED BY: _____

Authorized Signature _____

Supply Officer's Signature _____

UPON RETURN TO THE SHIP/ACTIVITY, THE FOLLOWING MUST BE COMPLETED: RECEIVED, INSPECTED AND VERIFIED ON:

DATE _____ BY: _____
Typed or Printed Name and Rank or Grade and Signature

UNIT MAILING ADDRESS

PURCHASE SUBTOTAL
PLUS 10% FOR PRICE VARIATIONS
PURCHASE TOTAL*
DD FORM 1348/NAVSUP FORM 1250-1 MAXIMUM AUTHORIZED
*MAY NOT EXCEED DOLLAR LIMIT ON DD FORM 1348 OR NAVSUP FORM 1250-1