						2. REQUEST NO	
	AF PURCHASE REQUEST	Heaquarters Support Company 25th ID XYX Anystreet Schofield Barracks, HI 96857				999	
	of this form, see AR 215-4; the ponent agency is DCSPER					DATE	
		TELEPHONE NUMBER 808-555-1212			09 JAN. 2024		
4		ITEMS BEING REQUEST		2			
			QUANTITY		EST UNIT	ESTIMATED	
ITEM NO. a	b b	DESCRIPTION OF ITEM/SERVICE b		UNIT d	PRICE	AMOUNT f	
1	Luau reservations		150		\$27.50	\$4,125.00	
2							
3							
4							
5							
6							
7			1				
8							
9							
					<u>Subtotal</u>	\$4,125.00	
					Shipping		
					Total	\$4,125.00	
5. REQUESTED DELIVERY DATE		6. DELIVER TO		7SOLE	SOURCE JUSTIFIC	CATION ATTACHED	
1/21/2024		SGT Snuffy					
8. REQUESTOR'S SIGNATURE AND PRINTED NAME Joseph J. Snuffy		9. NAFI FUND MANAGER'S SIGNATURE AND PRINTED NAME					
Joseph J	. Shully	John Q. Public					
10. FUNDS ARE AVAILABLE IN THE AMOUNT OF:		11. ACCOUNTING DATA					
	\$						
12. TYPE TITLE OF CERTIFYING OFFICIAL		SIGNATURE			DATE:		
13. REMARKS		ORDER FROM:					
		Hawaiian Tropical Luau			Downpayment of 50% must be		
AAA111	15 Feb 2024	987 Someplace		placed 3 weeks prior to event			
	Unit Luau	Honolulu, HI 96801 date 808-121-5555 POC Mr. Smith					
APPROVAL/DISAPPROVAL AND DATE (<i>if applicable</i>) 14. INSTALLATION COMMANDER'S SIGNATURE AND PRINTED NAME DATE:					DΔTE·		

DA FORM 4065-R, FEB 87