



## On-Line Wants List Request Form

Date/Time Field

Organization Name:

Donee ID#

Mailing Address:

Phone Number:

Fax Number:

Email:

Contact Person:

Description and Quantity of  
Item(s):

**\*All requests must be filled out in its entirety and signed by an authorized representative from your organization as recognized by the Federal Surplus Property Program.**

**The Wants List is now available for all items through the Federal Surplus Property Program. All requests are valid for a period of a year, after that time, a new request must be submitted.**

This section for BSSO employee use Only.

Date Received:

Date Initial Contact Made: