

ORDER SHEET

6c. ORDER OTHER REQUEST DETAILS						17. Logistics Section: Fulfillment <small>NOTE: To be completed by the Level/Entity that fills the request (OA EOC, Region, State).</small>					
Item #	Priority ³	Detailed Specific Description <small>(Facility: Type, Tent, Trailer Size etc.) (Mobile Resources: Alternate Care Supply Cache, Mobile Field Hospital, Ambulance Strike Team)</small>	Product <small>(Ea, Cache, Team)</small>	Quantity ² Requested	Expected Duration of Use:	Quantity			Tracking #	Estimated Time of Arrival <small>(Date & Time)</small>	COST
						Approved	Filled	Back- Ordered			
Suggested Source(s) of Supply; Suitable Substitute(s); Special Delivery Comment(s):						Deliver to/Report to POC (Name, Title, Location, Tele#, Email, Radio, etc.)					

² QUANTITY: Number of individual items, caches, strike teams, or resources needed .

³ PRIORITY: (E)mergent <12 hour (RIMS:FLASH/HIGH), (U)rgent >12 hour (RIMS: MEDIUM) or (S)ustainment (RIMS: LOW)