NIH Supply Center

The FAR-approved *first* source for supplies

E-mail completed forms to: NIHSCMARKETINGTEAM@MAIL.NIH.GOV

Customer
New Item Request Form

Date of Request (mm/dd/yyyy): _____

Manufacturer/Brand: _____

Product Name: _____

Vendor Catalog Number: _____

Source/Vendor: _____

Description: _____

Unit of Issue (box, case, each, etc): _____

Price per Unit of Issue: _____

Estimated Monthly Usage: _____

Estimated Monthly Demand: _____

Email: _____

Phone: _____

IC and Bldg/Rm No: _____

User Name: _____

Signature: _____