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| LOCAL SERVICE REQUEST (LSR) For use of this form, see AR 25-1; the proponent agency is ODISC4. | | | | | | DATE SERVICE REQUIRED | | |
| TO: | | | | NAME AND TELEPHONE NUMBER OF PERSON WITH EXACT LOCATION KNOWLEDGE | | | | |
| THIS REQUEST IS FOR: <input type="checkbox"/> LOCAL TELEPHONE SERVICE <input type="checkbox"/> WATS <input type="checkbox"/> FX <input type="checkbox"/> OTHER | | | | INSTALL | REMOVE | MOVE | | |
| | | | MAIN LINE | | | | | |
| | | | EXTENSION(S) | | | | | |
| | | | KEY(S) | | | | | |
| | | | TELEPHONE NO. | | | | | |
| SPECIAL REQUESTS, WORK DETAILS, ADDITIONAL DIRECTORY AND NAME CHANGES, JUSTIFICATION, FUND CITE, ETC. | | | | | | | | |
| PRESENT LOCATION OF EQUIPMENT | | | | PRESENT DIRECTORY LISTING (Hq, Div, Br, Sec) | | | | |
| PROPOSED LOCATION OF EQUIPMENT | | | | PROPOSED DIRECTORY LISTING | | | | |
| CLASS OF SERVICE DESIRED | | | | TOTAL TELEPHONES AT ACTIVITY CONCERNED | | | | |
| DATE OF REQUEST | | TYPED NAME OF REQUESTER | | | SIGNATURE OF VALIDATING OFFICIAL | | | |
| INSTRUCTIONS: ALL COPIES WILL BE FORWARDED TO THE SUPPORTING C-E OFFICER. | | | | | | | | |
| CONSENT STATEMENT: ALL UNOFFICIAL (CLASS R) MILITARY TELEPHONE SUBSCRIBERS WILL READ AND SIGN THE FOLLOWING CONSENT STATEMENT: <p style="text-align: center;">I (DO) (DO NOT) DESIRE TO HAVE MY HOME TELEPHONE NUMBER PUBLISHED IN THE POST TELEPHONE DIRECTORY (AND) (NOR) LISTED IN THE POST OPERATOR INFORMATION FILES. IT IS FURTHER UNDERSTOOD AND AGREED THAT CONSENT OF LISTING AND PUBLICATION CONSTITUTES CONSENT TO PUBLIC DISCLOSURE.</p> | | | | | | | | |
| | | | | | | _____ NAME AND RANK | | |
| FOR USE OF THE C-E OFFICE | | | | | | | | |
| REQUEST APPROVED BY | | | | WORK ORDER NUMBER | | | | |
| CHARGES | | | CONTRACT AUTHORIZATION | | | | | |
| MONTHLY CHARGES | | NONRECURRING CHARGE | CONTRACT NUMBER | | RENTED SERVICE C.S.A NUMBER | MAINTENANCE SERVICE C.S.A. NUMBER | | |
| CABLE | PAIR | TERMINAL No. | LOCATION | | | BUILDING | 1ST PAIR | X CONN |
| IN | | | | | | | | |
| OUT | | | | | | | | |
| RECORDS POSTED | WIRE CHIEF | | WORK COMPLETED BY | | DATE DUE | | DATE COMPLETED | |
| RECORDS POSTED | CHIEF OPERATOR | | ACCOUNTS CLERK | | EQUIPMENT USED | | | |
| RECORDS POSTED | SERVICE ORDER CLERK | | DIRECTORY CLERK | | | | | |

SEE ATTACHED CUT SHEET

MATERIAL USED

| AMOUNT USED | RE-CLAIMED | DESCRIPTION | AMOUNT USED | RE-CLAIMED | DESCRIPTION |
|-------------|------------|-------------|-------------|------------|-------------|
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REMARKS

(Installer)

REMARKS

(Wire Chief)