ADVANCE ACQUISITION PLAN

1. Office/Program:						
2. Project Description:						
3. Project Officer/Leader:			Telephone Number			
4. Total Estimated Cost: \$			emental Funding: Yes No			
Funding: 1 st Year Available \$ Yes No	Funding: 2 nd Year Available Funding: 3 rd Year			Available No		
6. Feasibility of Consideration for Set-A (If no, briefly discuss reasons)	Aside Progr	am: _	Yes	No		
7. Required Start Date:	8. Required Completion/Delivery Date:					
*9. Procurement method (and associated administrative lead time): Formally Advertised (60 days) Negotiated Competitive (120 days) Modification (30 days 10. Date MON or DI-1 Requisition Required from Program Office://						
11. Small Business Set-Aside:		_ Yes	No			
Labor Surplus Area Set-Aside: Minority Business:	<u>-</u>	_ Yes	No No			
Approvals/Concurrence:(Con	ntract Spec	ialist)		(Date)	,	
(Project Leader)			(Date)			

^{*}Since the acceptability of the sole/single source justification cannot be predetermined, only formally advertised or negotiated competitive procurement lead times are to be used for planning purposes.