
MANAGEMENT

PREPARATION OF PURCHASE/SERVICE/STOCK REQUISITION
(FORM HHS-393)

CONTENTS

PURPOSE
BACKGROUND
REFERENCES
AUTHORITY
EFFECTIVE DATE

**Attachment A: Sample of Purchase/Service/Stock Requisition
(Form HHS-393).**

PURPOSE This MAPP provides procedures and guidance for designating the signatory authorities to certify the availability of funds, to recommend approval, and to approve requests for the Purchase/Service/Stock Requisition on Form HHS 393.

BACKGROUND

The Federal Managers' Financial Integrity Act of 1982 (FMFIA) requires management to maintain adequate systems of internal control and accounting to reduce fraud, waste, and abuse. The *GAO Standards for Internal Controls in the Federal Government* require that authorizations be clearly stated and that key duties and responsibilities be separated. The following procedures are to be followed by all CDER personnel involved in the procurement of items or services.

REFERENCES

- CDER Staff Manual Guide 2610.1, *Procurement and Supply Management - Preparation of Purchase/Service/Stock Requisition.*
- FDA Staff Manual Guide 1465.3, *Authority to Allocate Funds.*

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- FDA Staff Manual Guide 1465.4, *Authority to Make Allotments and Authorize the Establishment of Allowances.*
 - CDER MAPP 4631.1, *Supplement to Authority to Make Allotments and Authorize the Establishment of Allowances.*
 - FDA Staff Manual Guide 1465.5, *Authority to Establish and Authorize Officials to Sign Obligating Documents and/or Commitment Documents.*
 - FDA Staff Manual Guide 2310.1, *Administrative Control of Funds - Allotments and Allowances.*
 - CDER Staff Manual Guide 2310.1, *Administrative Control of Funds.*
 - FDA Staff Manual Guide 2610.7, *Requisitioning of Articles or Services to be Purchased.*
 - General Accounting Office, *Standards for Internal Controls in the Federal Government*, October 31, 1984.
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AUTHORITY

This MAPP supplements FDA Staff Manual Guide 2610.7. The GAO Standards require that duties relating to authorizing, processing, recording, and reviewing transactions be separated among individuals. Therefore, different individuals are required to sign the signature blocks on a HHS-393 (see Attachment). **The Approving Official and the Funds Available Official must be different individuals.**

- The **Requested By** block may be signed by any employee of the Center requesting the procurement of some service or item for government use. It is not required if the Approving Official is the requester.
- The **Recommend Approval** block is optional but if used, it should be signed by the first-line supervisor of the requesting official. It is not required if the Approving Official is the requester.
- The **Approved By** block can be signed by Branch Chief or higher but must be different from either of the other two signatures. Requirements for dollar amounts above the Management Officer, Administrative Officer or Program Specialist funding authority are to be approved by the Division Director,

Staff Director, or above.

- The **Funds Available** block will be signed by the Management Officer, Administrative Officer or Program Specialist after the Program Official has approved the purchase. If the Management Officer, Administrative Officer or Program Specialist are not available, and/or if the dollar limit of their authority is exceeded, the Chief, Planning and Resource Management Branch, or designee, will sign.
 - The **Property Management Officer** block will be signed by the Chief, Procurement Section, HFA-266.
 - The **Receiving Official** can be **any employee** assigned to the receiving organization actually taking possession of the received property. Persons signing receiving reports are responsible for forwarding copies to the appropriate offices for financial accounting and property accountability.
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EFFECTIVE DATE

This MAPP is effective upon date of publication.

Attachment A

DEPARTMENT OF
HEALTH AND HUMAN SERVICES
PURCHASE/SERVICE/STOCK REQUISITION

BPA and Call No. _____

		REQUISITION NUMBER _____			
		OFFICE CODE/SYMBOL _____			
TO _____		REQUEST FOR <input type="checkbox"/> PURCHASE <input type="checkbox"/> SERVICE <input type="checkbox"/> STOCK ISSUE <input type="checkbox"/> RENT/LEASE			
REQUESTING ORGANIZATION _____	CUSTOMER AREA _____	DATE _____	OBJECT CLASS _____		
FOR REFERENCE CALL _____	EXTENSION _____	APPROPRIATION _____			
DELIVER TO _____		CASH _____			
		DATE REQUIRED _____			
ITEM NO.	DESCRIPTION (INCLUDE STOCK NUMBER, MODEL/PART NO., ETC.)	QUANTITY REQUIRED	UNIT OF ISSUE	COST	
				UNIT	TOTAL
<small>Indicate if the property/service requested was required for Government's business, and if not available from sources or current stocks.</small>		Funds AVAILABLE (Signature/Title) _____	DATE _____	TOTAL _____	
REQUESTED BY (Signature/Title) *	DATE _____	RECEIVING OFFICIAL - Indicate the quantities indicated in the "Quantity Requested" column above have been received in full or as indicated.			
RECOMMEND APPROVAL (Signature/Title) *	DATE _____	RECEIVING OFFICIAL (Signature/Title) _____		DATE _____	
APPROVED BY (Signature/Title) *	DATE _____	ORDER NO. (PO, JO, FECS TRIP, ETC.) _____		ORDER DATE _____	
PROPERTY MANAGEMENT OFFICER (Signature) *	DATE _____	VOUCHER NO. _____		VOUCHER DATE _____	

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