REIMBURSABLE WORK AUTHORIZATION

1. DATE OF REQUEST

2. RWA NUMBER *(GSA Use Only)*

3. NAME OF AGENCY

4. WORK SITE

5A. CONTACT'S NAME

5B. CONTACT'S TELEPHONE NO. AREA CODE | PHONE NUMBER | EXT.

5C. CONTACT'S FAX NUMBER AREA CODE | PHONE NUMBER

5D. CONTACT'S ADDRESS

5E. CONTACT'S E-MAIL

6. DETAILED DESCRIPTION OF REQUESTED WORK

CHECK AS APPROPRIATE

7. PLANS ATTACHED

8. MOD

10. REQUESTED WORK DATES

A. START:

B. COMPLETION:

13A. FED CODE

13B. BUREAU CODE

14A. AGENCY FINANCE BILLING OFFICE

9A. BILLING TYPE

9B. BILLING TERMS

11. AMOUNT CERTIFIED BY AGENCY

14B. STREET ADDRESS

12A. AGENCY LOCATION CODE

12B. AGENCY ID NO.

12C. FUND CODE

14C. CITY

14D. STATE

14E. ZIP CODE

12D. AGENCY ACCOUNTING DATA *(Limited to 60 characters)*

16A. CREDIT CARD NUMBER

16B. EXPIRATION DATE

16C. TYPE OF CARD *(i.e., VISA)*

16D. NAME OF CARD HOLDER

15A. CERTIFICATION SIGNATURE

15B. DATE

17. TELEPHONE NUMBER OF CERTIFYING OFFICIAL

15C. NAME OF SIGNER

AREA CODE | PHONE NUMBER | EXT.

NOTE: GSA will bill in accordance with FPMR Part 101-21.604(e)

FOR GENERAL SERVICES ADMINISTRATION USE ONLY

18. PROJECT NO.

19A. ORGANIZATION CODE

19B. B/A CODE

19C. BOAC CODE

19D. CORRES. SYMBOL

20. BRIEF PROJECT DESCRIPTION *(Limited to 25 characters)*

21. ACTION *(Check one)*

☐ NEW ☐ CHANGE ☐ DELETE ☐ COMPLETE

22. PLEASE CHECK IF APPROPRIATE

☐ COST BREAKDOWN ATTACHED ☐ MULTIPLE BLDG./FUNCTION *(See reverse)*

☐ 23. FIXED PRICE DOES NOT APPLY

☐ 24. GUARANTEE DOES NOT APPLY

25. AGREED UPON COMPLETION DATE

26A. ORGANIZATION CODE	26B. BUILDING NUMBER	26C. LEASE NUMBER	26D. FUNCTION CODE	26E. O/C	26F. TOTAL

26G. GRANDTOTAL

27A. GSA APPROVING OFFICIAL'S SIGNATURE

27B. DATE

27C. TELEPHONE

AREA CODE | NUMBER | EXT.

27D. NAME

28. POINT OF SALE TERMINAL *(For credit card purchases only)*

☐ A. FINANCE ☐ B. PBS

29A. CERTIFICATE OF COMPLETION SIGNATURE

29B. SIGNER'S NAME *(Type or Print)*

29C. COMPLETION DATE

INSTRUCTIONS

GENERAL: Keep a copy for your record and forward one copy to your obligating/paying office.

ITEM NO.	SPECIFIC ITEM
1.	Enter date of work request.
2.	*For GSA Use Only.*
3.	Enter name of agency requesting the work.
4.	Enter location where work is to be performed. If multiple locations, use attachment (below).
5A-E.	Enter information regarding the individual with the authority to make decisions regarding the project.
6.	Enter a concise statment of work to be done, including location where work is to be performed.
7.	Check if agency plans are attached.
8.	Check if submittal is a modification to an existing RWA.
9A.	Enter billing type: 1 = Interfund, C = Credit Card, P = Prepaid
9B.	Enter billing terms: A = Advance, C = At completion, M = Monthly, Q = Quarterly, T = At termination, Y = Annually (in arrears), non-recurring RWA's under $25,000 will be billed at project completion. Default for billing is monthly for projects over $25,000.
10A-B.	Enter requested project start and completion dates.
11.	Enter the total dollar amount approved for funding. Must match GSA's cost quote.
12A.	Enter the eight (8) character Agency Location Code. (Treasury Pay-Station Designator)
12B.	Enter the appropriate agency identification number.
12C.	Enter the appropriate agency fund code.
12D.	Enter agency accounting information (limited to 60 characters). **THIS WILL APPEAR ON YOUR BILL**.
13A.	Enter the agency Fed Code.
13B.	Enter the agency Bureau Code.
14A-E.	Enter the appropriate billing address information.
15A-C.	Enter the date, signature, and name of agency's authorized representative, certifying the validity of order and the availability of funds.
16A-D.	Enter the credit card number, type of card, card holder's name, and expiration date. (You may contact your GSA Representative and provide the information confidentially.)
17.	Enter the certifying official's phone number.

GSA USE ONLY

18.	Enter project number, if applicable.
19A-D.	Enter: a. GSA Organization Code, b. B/A code, c. BOAC code, and d. the Organization Correspondence Symbol.
20.	Enter a brief project description, limited to 25 characters.
21.	Check the appropriate action block.
22.	Check box(es) if appropriate.
23.	Check if the project is **NOT** fixed price. If the project is to be actual cost instead of fixed price, the requesting agency contact should be advised that his/her agency is responsible for all actual costs, including overhead.
24.	Check if the guarantee **DOES NOT** apply.
25.	Enter the mutually agreed upon completion date.
26A-G.	Enter the Organization Code, Building Number, Lease Number, Function Code, Object Class, Total Dollar Amount, and Grand Total.
27A-D.	Enter the signature, name, date, and telephone number of the GSA Approving Official.
28.	Enter the Point of Sale Terminal (for Credit Card Purchases Only).
29A-C.	Enter the certificate of completion signature, name, and date when the project was physically completed.

ATTACHMENT - MULTIPLE BUILDINGS/MULTIPLE FUNCTION

ORGANIZATION CODE	BUILDING NUMBER	LEASE NUMBER	FUNCTION CODE	O/C	TOTAL