The recipient of the Materiel will require the information below for each item of Materiel supplied. Please record the information for all Contractor Deliverables. Assistance to complete the form will be provided by text prompts in certain cells and can also be found on the Guidance for Completion of Form page. Please use one row per Contractor Deliverable.

	Product Name	Description	Part Number	NSN Part Number	Manufacturer	Address	CAGE/NCAGE	Country of Origin	Security
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