EMERGENCY EQUIPMENT FUEL AND OIL ISSUE			POSTED TO EQUIPMENT INVOICE (FINANCE			
SEE COVER FOR INSTRUCTIONS		USE ONLY) INITIALS:		DATE:		
1. INCIDENT NAME AND NUMBER	2.EQUIPM	EQUIPMENT OWNERSHIP (AGENCY OR CONTRACTOR NAME):				
3. RESOURCE ORDER NUMBER	4. ITEM DESCRIPTION & VIN/SERIAL NUMBER					
5. COMMODITY (circle appropriate items)		6. QUANTITY	7. UNIT	8. UNIT PRICE	9. AMOUNT	
UNLEADED GAS DIESEL 10. OIL OTHER (specify)						
11. DATE AND TIME ISSUED	12. REMARKS			13. TOTAL		
14. FUEL DISPENSING AGENT'S SIGNATURE		16. RECEIVING AGENT'S SIGNATURE				
15. PRINT NAME AND TITLE		17. PRINT NAME AND TITLE				
NSN 7540-01-317-7366 50304-101			OPTION USDA/U	AL FORM 304 (7-90) SDI		