	GITY DRUG TRAFFIC						
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(This form is intended to be used by Initiative/Task Fo	APPALACHIA						
Initiative Name:							
Initiative/Task Force Commander:				TENNESSEE - VIRGINIA . WES			
Date of Request:				EE+VIRGI			
Justification: Provide a <u>detailed</u> and <u>thorough</u> explanation of why this task force has a need for this equipment.							
EQUIPMENT REQUESTED:							
Item	Vendor						
(If additional lines needed, please attach separate sheet.)	(Attach any documentation you have regarding the purchase such as web-site screen shots, quotes from vendor, etc.)	Quantity	Amount per Item	Total Requested			
			Total				
NDAA INQUIRY: Are any items listed above man Company, ZTE Corporation, Hytera Communication Company	Yes or No						
Select Preferred Funding Source:							
Preferred funding sources are items 1 o 1. Reprogram current year state/local b 2. Reprogram current year federal budg	oudgets for this task force.	Check one					
Less Preferred funding source: 3. Request additional funding from AHII	DTA.						
(This source of funding is dependent upon availability of funds and may not always be a funding option.)							
(If item 1 or 2 is selected above, also attach an Appalachia HIDTA reprogramming form with this request.)							
EQUIPMENT PURCHASING : It is the policy of Appalachia HIDTA that each initiative/ task force purchase their approved equipment, then seek reimbursement from Appalachia HIDTA using form LC-07. (If the initiative/ task force commander wishes to seek a policy waiver regarding equipment purchases, they must complete page two of this form.)							
CERTIFICATION REGARDING NATIONAL DEFENCE AUTHORIZATION ACT COMPLIANCE (NDAA) :							
Effective January 3, 2020, Section § 889 funds to be used to purchase or reimbur Chinese entities. By signing this form, the Guidance for Implementation of the Feat Pre-Purchase Checklist *; has taken ever unnecessarily increase vulnerability; and	rsee certain telecommunication ne Task Force Commander certit leral Grantee Provisions in the N precaution to ensure that equi	s and video surv fies that he/she lational Defense pment and serv	veillance equipment and so has read and understands a Authorization Act *; has ices purchased from foreign	ervices produced by certain the ONDCP HIDTA Program reviewed the AHIDTA NDAA			
Agency that will purchase equ	uipment and seek reimbursement:						
	Task Force Commander Signature:						
	Printed Name:						
	Yes or No			Yes or No			
State Coordinator's Recommendation:		Director's Approval: Date:		100 01 110			
Date:							
		Director's Signature:					
State Coordinator Signature: State Coordinator's Comments:	Director's Comments:						
NOTES: 1. If equipment request is approved, the request for reimbursement must be submitted within 60 days from date of this approval.							
2. If the equipment being purchased is over \$5,000 per item, the reimbursement request must include a completed inventory form AH-01.							
* These documents are maintained on the AHIDTA website at www.ahidta.org . They can be found under the "Resources" tab in "Forms and Documents".							

Appalachia HIDTA **Policy Waiver-Equipment Purchasing**



This form should be used when an Initiative/Task Force (Initiative/Task Force is able to purchase equipment and use this form to request that Appalachia HIDTA purchase Initiative/Task Force.	A PPA LA CHIA SENTENCIA DE LA			
Initiative Name:				TEWESSEE - VIRGINIA WES
Initiative/Task Force Commander:				
Date of Request				
Appalachia HIDTA Policy: It is the policy of Appalachia HIDTA that ea from Appalachia HIDTA using form LC-07.	ach task force purcha	ase their approved	equipment, ther	n seek reimbursement
Waiver Request: Explain below reasons why this task force Request Form. Also, attach any document from vendors, etc.				