



## Defense Contract Management Agency

### Commercial Item Group

## Request Support

After completing this form and clicking submit, an automatic email will be sent to [dcma.boston-ma.eastern-rs.mbx.commercial@mail.mil](mailto:dcma.boston-ma.eastern-rs.mbx.commercial@mail.mil) where the request will be processed, and assigned to a price/cost analyst and/or engineer. You will hear from them as soon as it's been assigned.

### REQUESTER INFORMATION

NAME:

First

Last

EMAIL:

PHONE:

AGENCY:

### ABOUT THE ACQUISITION

PROGRAM NAME/DESCRIPTION:

INDUSTRY:

TOTAL VALUE OF THE PROPOSED COMMERCIAL ACQUISITION:  
(ESTIMATED IF PRE-PROPOSAL)

IS THIS A PRODUCT OR A SERVICE:

WHO IS SUPPLYING THE PRODUCT OR  
SERVICE IN QUESTION?

PRIME CONTRACTOR:

SUBCONTRACTOR: *(if applicable)*

CAGE CODE: *(Enter N/A if not applicable)*

CAGE CODE: *(Enter N/A if not applicable)*

POC NAME:

POC NAME:

PHONE:

PHONE:

EMAIL:

EMAIL:

If multiple  
Subcontractors,  
type Multiple  
and include ALL  
Subcontractors in  
the NOTES Section

HAS THE PRIME CONTRACTOR PROVIDED A CID IAW DFAR 244.402?:

## ADDITIONAL INFORMATION

IS THERE PRIOR ANALYSIS?

IS THERE AN EXISTING COMMERCIAL ITEM DETERMINATION?

NOTES:

## SCOPE OF THE REQUEST

WHAT CAN THE CIG DO FOR YOU?

WHEN DO YOU NEED IT BY?

MM/DD/YYYY

PHASE OF ACQUISITION

NUMBER OF UNIQUE ITEMS/SERVICES REQUESTED FOR REVIEW

PART NUMBERS/NSNs *(Can paste a list)*

ANY OTHER ADDITIONAL INFORMATION