

## ANSWER ONLY IF YOUR REQUEST IS FOR PRODUCTION MATERIALS.

13. List for the division or plant in which **ITEM WILL BE USED**, the total dollar value of business by groups specified below. Fill in column (a) if you have orders scheduled, **OR** if you are engaged in a service industry such as hotels, repair shops, cleaners, etc., you may fill in column (b) instead. It is not necessary to fill in both columns.

| RATING                        | ORDERS ON YOUR BOOKS SCHEDULED FOR DELIVERY IN NEXT THREE MONTHS<br>(a) | SALES OR BILLINGS DURING PAST THREE MONTHS<br>(b) | PERCENT<br>(c) |
|-------------------------------|---|---|----------------|
| AA-1 and above                |   |   |                |
| AA-2 to AA-4 (inclusive)      |   |   |                |
| All other (rated and unrated) |   |   |                |
| TOTAL                         |   |   | 100            |

14. Do you have a rating which you may apply to the delivery of **THIS ITEM(S)**? ☐ Yes ☐ No

If yes, indicate present rating in space below

| RATING AUTHORIZED BY:                       | RATING | SERIAL No.<br>(If any) |
|---|--------|------------------------|
| WPB-541, or PD-1A (see question 10, page 1) |        |                        |
| WPB-2613, or PD-870                         |        |                        |
| CMP Regulation No. 5, 5A                    |        |                        |
| CMP Regulation No. 8                        |        |                        |
| P Order (specify No.)                       |        |                        |
| Other (specify):                            |        |                        |

15. Item(s) for which priority assistance is requested (**DELIVERY DATES MUST BE SPECIFIC**)

| Give Quantities and Description of Equipment or Material. Use Purchase Order Description in Full (Including Weight in Pounds if Requesting Raw Materials)<br>(a) | Approximate value per unit<br>(b) | Number of units in each shipment<br>(c) | REQUIRED DELIVERY DATE(S) |            |             | Est. No. of months quantity requested in THIS APPLICATION will last<br>(g) | LEAVE BLANK                     |                        | 16. Quantities of these items in your inventory and/or delivery promised (exclusive of items in this request) |
|--|-----------------------------------|---|---------------------------|------------|-------------|--|---------------------------------|------------------------|---|
|  |                                   |   | Month<br>(d)              | Day<br>(e) | Year<br>(f) |  | Number of units approved<br>(h) | Rating assigned<br>(i) |   |
| 1 Type MSVC-M Vacuum Chlorinator equipped with 4 lb. meter, spare 10 lb. meter capacity, standard accessories  | \$1215.00                         | 1                                       | 5                         | 15         | 44          | 10-15 years  |                                 |                        | 1<br>(obsolete)   |