FORT BELVOIR DFMWR
FIXED ASSET TRANSMITTAL COVER

GARRISON: RE FUND: 1

LOCATION: 6H

NAME THE PDF FILE THIS: **RE16HACTAUG20180828A**

FACILITY: DFMWR PROPERTY BOOK OFFICE

SUBMISSION SUFFIX (A = ORIGINAL, B = RESUBMISSION #1,etc) A

TODAYS DATE(YYYYMMDD): 20180828

TRANSACTION MONTH: AUG BUSINESS MONTH: JUN

Number of Pages

2	Fixed Asset Load Sheets
14	Supporting Documents for Fixed Asset Load Sheets
	Fixed Asset Inventory with Supporting Documents
1	Transmittal Cover and Others
17	**TOTAL PAGES SCANNED**

Comments:		
Jim Burnett	DSN: 655-3675	james.a.burnett.naf@mail.mil

FORT BELVOIR, VIRGINIA DFMWR

FIXED ASSET

REPORTING FORM

Project Code: UFMA 1806

Fixed Asset #: RE16HU3414

☑ Add New Asset ☐ Change Asset

☐ Delete Asset

Add, Change, Delete:

Installation Code	RE	Physical Location	BDG 778	
Fund Code	1	Acquisition Cost	$49,300.00	
Location Code	6H	Months To Depreciate	N/A	
Subledger	U	Depreciation To Date		
Asset #	3414	Date of Receipt	180618	(yymmdd)
Nomenclature	TRAILER TRAVEL	Quantity	4	
Department	GL			

	Project Code	Purchase Document	Description
B-Line:	UFMA 1806		2019 COACHMEN VIKING 17BH
C-Line:	VIN-5ZT2VWFC4KJ120670, 5ZT2VWFC5KJ120631, 5ZT2VWFC6KJ120671,		
D-Line:	5ZT2VWFC8KJ120669		

Remarks:

Signature: Digitally signed by BURNETT.JAMES.A.1230303050 Date: 2018.08.28 09:56:52 -04'00'

Date: 180828

MATERIAL INSPECTION AND RECEIVING REPORT

Form Approved
OMB No. 0704-0248

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE ABOVE ORGANIZATION.
SEND THIS FORM IN ACCORDANCE WITH THE INSTRUCTIONS CONTAINED IN THE DFARS, APPENDIX F-401.

1. PROCUREMENT INSTRUMENT IDENTIFICATION (CONTRACT) NO.	ORDER NO.	6. INVOICE NO./DATE	7. PAGE	OF	8. ACCEPTANCE POINT
NAFIB4-18-M-0191		07/10/2018	1	1	

2. SHIPMENT NO.	3. DATE SHIPPED	4. B/L	5. DISCOUNT TERMS
		TCN	

9. PRIME CONTRACTOR CODE 066766296
Restless Wheels Inc
Attn: Robert Helbock
8104 Centerville Rd
Manassas, VA 20111 USA

10. ADMINISTERED BY CODE IB4-KESSLER RI
Vanessa Kessler-Rice
PHONE: 703-696-7046
FAX: 703-696-3064
vanessa.b.kesslerrice.naf@mail.mil

11. SHIPPED FROM *(If other than 9)* CODE | FOB:

12. PAYMENT WILL BE MADE BY CODE RE
DFAS Texarkana
ACCOUNTS PAYABLE (Fort Belvoir)
PO BOX 6111
TEXARKANA TX 75505-6111 USA

13. SHIPPED TO CODE
Ft Belvoir Outdoor Rec
10155 Johnston Road, Building 778
Fort Belvoir, VA 22060

14. MARKED FOR CODE

15. ITEM NO.	16. STOCK/PART NO. DESCRIPTION *(Indicate number of shipping containers - type of container - container number.)*	17. QUANTITY SHIP/REC'D*	18. UNIT	19. UNIT PRICE	20. AMOUNT
0001	2019 Coachmen Viking 17BH Travel Trailer 5ZT2VWFC6KJ120671, 5ZT2VWFCKJ120631 5ZT2VWFC8KJ120669, 5ZT2VWFC4KJ20670	4		12325	49300
0002	2018 Coachmen Viking V12RBST HW Camping Trailer 5ZT1VKAC3J5014084, 5ZT1VKAC3J5014083	2		13000	26000

21. CONTRACT QUALITY ASSURANCE

a. ORIGIN
☐ CQA ☒ ACCEPTANCE of listed items has been made by me or under my supervision and they conform to contract, except as noted herein or on supporting documents.
6/18/18 — KIPPER.BRIANNA.MARIE.1364346049 Digitally signed by KIPPER.BRIANNA.MARIE.1364346049 Date: 2018.07.05 08:02:53 -04'00'
DATE — SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE
TYPED NAME: Brianna Kipper
TITLE: ODR Director
MAILING ADDRESS: 5820 21st Street, Suite 210, Fort Belvoir, VA 22060
COMMERCIAL TELEPHONE NUMBER: 703-805-1488

b. DESTINATION
☐ CQA ☒ ACCEPTANCE of listed items has been made by me or under my supervision and they conform to contract, except as noted herein or on supporting documents.
6/18/18 — KIPPER.BRIANNA.MARIE.1364346049 Digitally signed by KIPPER.BRIANNA.MARIE.1364346049 Date: 2018.07.05 08:15:14 -04'00'
DATE — SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE
TYPED NAME: Brianna Kipper
TITLE: ODR Director
MAILING ADDRESS: 5820 21st Street, Suite 210, Fort Belvoir, VA 22060
COMMERCIAL TELEPHONE NUMBER: 703-805-1488

22. RECEIVER'S USE
Quantities shown in column 17 were received in apparent good condition except as noted.
6/18/18 — KIPPER.BRIANNA.MARIE.1364346049 Digitally signed by KIPPER.BRIANNA.MARIE.1364346049 Date: 2018.07.05 08:15:28 -04'00'
DATE RECEIVED — SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE
TYPED NAME: Brianna Kipper
TITLE: ODR Director
MAILING ADDRESS: 5820 21st Street, Suite 210, Fort Belvoir, VA 22060
COMMERCIAL TELEPHONE NUMBER: 703-805-1488
** If quantity received by the Government is the same as quantity shipped, indicate by (X) mark; if different, enter actual quantity received below quantity shipped and encircle.*

23. CONTRACTOR USE ONLY

MATERIAL INSPECTION AND RECEIVING REPORT

Form Approved
OMB No. 0704-0248

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Attn: Robert Helbock
8104 Centerville Rd
Manassas, VA 20111 USA

10. ADMINISTERED BY CODE IB4-KESSLER RI
Vanessa Kessler-Rice
PHONE: 703-696-7046
FAX: 703-696-3064
vanessa.b.kesslerrice.naf@mail.mil

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12. PAYMENT WILL BE MADE BY CODE RE
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ACCOUNTS PAYABLE (Fort Belvoir)
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TEXARKANA TX 75505-6111 USA

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21. CONTRACT QUALITY ASSURANCE

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6/18/18 — DATE
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TYPED NAME: Brianna Kipper
TITLE: ODR Director
MAILING ADDRESS:
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COMMERCIAL TELEPHONE NUMBER: 703-805-1488

b. DESTINATION
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TYPED NAME: Brianna Kipper
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COMMERCIAL TELEPHONE NUMBER: 703-805-1488

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23. CONTRACTOR USE ONLY

RESTLESS WHEELS, INC.

8104 Centreville Road (Rte 28)
MANASSAS, VIRGINIA 20111-2220
(703) 257-1067 • Fax: (703) 257-1176

BUYER(S) DFMWR Outdoor Recreation 22060
ADDRESS 5820 21st Street Suite 200 Fort Belvoir, VA. COUNTY
SALESPERSON BOB LIC. NO. RES. PHONE 703-805-1488 BUS. PHONE DATE 6/14/18
YEAR 2019 MAKE Viking MODEL 17BH APPROXIMATE L W STOCK NUMBER
CHASSIS MAKE & MODEL SERIAL NUMBER 5ZT2VWFC8KJ120669 YEAR GROSS VEHICLE WT.
☒ NEW ☐ USED COLOR SERIAL NUMBER PROPOSED DELIVERY DATE Thurs. 6/21 ODOMETER READING

INSURANCE AGAINST LIABILITY FOR BODILY INJURY OR PROPERTY DAMAGE TO OTHERS IS NOT INCLUDED IN THIS TRANSACTION.

OPTIONAL EQUIPMENT, LABOR AND ACCESSORIES

	$
PDI	
VA. Inspection	
PLEASE HAVE	
PERSONAL CHECKS	
CERTIFIED	
BALANCE CARRIED TO OPTIONAL EQUIPMENT	$

TITLE APPLICATION INFORMATION

	PRINCIPAL BUYER	CO-BUYER
DATE OF BIRTH		
DRIVER'S LIC. #		
SOCIAL SEC. #		

BASE PRICE OF UNIT	$12,325.00
OPTIONAL EQUIPMENT	
SUB-TOTAL	$12,325.00
TITLE	
REGISTRATION FEE	
BUSINESS LICENSE TAX	
SALES TAX (If State Required)	
CASH PURCHASE PRICE	$12,325.00
TRADE-IN ALLOWANCE $	
LESS BAL. DUE ON ABOVE $	
NET ALLOWANCE $	
CASH DOWN PAYMENT $	
CASH AS AGREED $	
LESS TOTAL CREDITS	$
SUB-TOTAL	$
NON-TAXABLE ITEMS	
VARIOUS FEES AND INSURANCE	
(Explain)	
PROCESSING FEE	NONE
SALES TAX (If Not Included Above)	
UNPAID BALANCE OF CASH SALE PRICE	$

"NO LIABILITY INSURANCE INCLUDED"

DESCRIPTION OF TRADE-IN SIZE x MAKE
MODEL & YEAR COLOR CHASSIS MAKE SERIAL NO.
ODOMETER READING UNIT SERIAL NO. TITLE NO.
AMOUNT OWING TO WHOM ANY DEBT BUYER OWES ON TRADE-IN IS TO BE PAID BY ☐ DEALER ☐ BUYER

IT IS MUTUALLY UNDERSTOOD THAT THIS AGREEMENT IS SUBJECT TO NECESSARY CORRECTIONS AND ADJUSTMENTS CONCERNING CHANGES IN NET PAYOFF ON TRADE-IN TO BE MADE AT THE TIME OF SETTLEMENT.

Buyer is purchasing the above described Unit, the optional equipment and accessories, the insurance has been voluntary; the Buyer's trade-in is free from all claims whatsoever, except as noted.

THE REVERSE SIDE of this Agreement contains **ADDITIONAL TERMS AND CONDITIONS,** including, but not limited to, provisions regarding **WARRANTY, EXCLUSIONS AND LIMITATIONS OF DAMAGES.**

Dealer and Buyer acknowledge and certify that such (the) additional terms and conditions printed on the other side of this Agreement are agreed to as part of this Agreement, the same as if printed above the signatures.

The Agreement contains the entire Agreement between the Dealer and Buyer and no other representation or inducement, verbal or written, has been made which is not contained in this Agreement. Buyer(s) acknowledge receipt of a copy of this Agreement (order) and that Buyer(s) have read and understand the back of this Agreement.

RESTLESS WHEELS, INC. DEALER SIGNED X _____ BUYER
Not Valid Unless Signed and Accepted by an Officer or Authorized Agent of the Company

By _____ *Approved* SIGNED X _____ BUYER

CERTIFICATE OF ORIGIN FOR A VEHICLE

FOREST RIVER, INC.

DATE
5/23/2018

INVOICE NO.
S0271822

VEHICLE IDENTIFICATION NO.
5ZT2VWFC8KJ120669

YEAR
2019

MAKE
VIKING TOWABLE

BODY TYPE
TRAVEL TRAILER

SHIPPING WEIGHT
2952

H.P. (S.A.E.)	G.V.W.R.	NO. CYLS.	SERIES OR MODEL
	3756		VIKING TOWABLE

LENGTH WITH HITCH 21'2" , WITHOUT HITCH
18'1" , WIDTH 7'4"

VWT17BH

I, the undersigned authorized representative of the company, firm or corporation named below, hereby certify that the new vehicle described above is the property of the said company, firm or corporation and is transferred on the above date and under the Invoice Number indicated to the following distributor or dealer.

NAME OF DISTRIBUTOR, DEALER, ETC.

RESTLESS WHEELS
8104 CENTREVILLE RD.
MANASSAS, VA 20111-2220
USA

If the vehicle described hereon is a motor home the undersigned certifies that it is equipped with at least four of the following life support systems; cooking, refrigeration or ice box, self-contained toilet, heating and/or air conditioning, a potable water supply system including a faucet and sink, separate 110-115 volt electrical power supply and/or an LP gas supply, all of which meet the ANSI A119.2 standards.

It is further certified that this was the first transfer of such new vehicle in ordinary trade and commerce.

FOREST RIVER, INC.

VWJ120669

BY: _____
(SIGNATURE OF AUTHORIZED REPRESENTATIVE) (AGENT)

900 COUNTY ROAD 1
ELKHART, IN 46515
CITY-STATE