Air Force Contracting E-Business Procedures Change Request

Internal Use Only	
Control Number	Date

Submitter's Name:		**Unit/Office Symbol:**
Phone Number:	**E-Mail Address:**	**Submission Date:**

Chapter/Appendix Number:	**Page Number(s):**	**Paragraph(s):**	**Table:**	**Figure:**

Impact of Error or Request:

- ◯ **Administrative** - Offer clarity, accuracy, and consistency such as grammar, punctuation, style, updated references, improper terminology, or minor errors.
- ◯ **Substantive** - Less significant deficiencies that do not prevent implementation of the publication. Information in the document appears to be unnecessary, incomplete, misleading, confusing, or inconsistent with other information in the document.
- ◯ **Critical** - Major deficiency affects the implementation of the publication. Contains critical information that is incorrect or contrary to published policy.

Reason for Change Request *(conflicts with other guidance/regulations, does not function as described, etc.)*: ◯ Change/Remove Info ◯ New Info

Recommended Change(s):

Reviewer:	◯ Approved ◯ Disapproved
Comments:	

Approval:	◯ Approved ◯ Disapproved
Comments:	

Continuation Page (*use as needed*):

Instructions:
Submitter: Complete change request, then e-mail to your MAJCOM FRB representative for review.
Reviewer: Review request, digitally sign and mark approve/disapprove, e-mail to AFCEP program manager.
Approval: AFCEP program manager assign control number and date received, digitally sign, and mark approved/disapproved.