

Government Bill of Lading Office Code (GBLOC) Request Worksheet				
Requesting Agency				
Name				
Organization				
Email				
Signature:		Date:		
Service/Agency HQ Representative				
Name				
Organization				
Email				
Signature:		Date:		
Requested Change (Add/Delete/Change):		GBLOC (leave blank if requesting a new code):		
GBLOC Description:				
Service/Agency	Standard Point Location Code (SPLC)			
GBLOC Street Address:	City	State Code	Country Code	
Primary DODAAC (required)	Additional/Alternate DODAACs (optional)			
Installation Transportation Officer				
Name:				
Organization:				
Email:				
Phone number	Commercial:		DSN:	
Submit completed form to <a href="mailto:usarmy.scott.sddc.mbx.g3-domestic-freight-services-branch@army.mil">usarmy.scott.sddc.mbx.g3-domestic-freight-services-branch@army.mil</a> . Forms without a Service/Agency HQ POC signature will not be accepted and returned to requestor.				