

5153.303-4 Format for a justification review document for other than full and open competition.

Control No:

Justification Review Document for Other Than Full and Open Competition

Program/Equipment:

Authority:

Amount:

Prepared by:

Typed Name: DSN: _____

Title: Date: _____

E-mail: _____

Contracting Officer:

Typed Name: DSN: _____

Date Reviewed: _____

E-Mail: _____

Technical Representative:

Typed Name: DSN: _____

Title: Date Reviewed: _____

Requirements Representative:

Typed Name: DSN: _____

Title: Date Reviewed: _____

Reviews: I have reviewed this justification and find it adequate to support other than full and open competition.

Program Manager (1)

Typed Name: DSN: _____

Signature: _____ Date: _____

Legal Counsel

Typed Name: DSN: _____

Signature: _____ Date: _____

Command Advocate for Competition

Typed Name: DSN: _____

Signature: _____ Date: _____

Senior Contracting Official

Typed Name: DSN: _____

Signature: _____ Date: _____

(1) Add Program Executive Officer signature block when item is Program Executive Officer managed.

Head of the Contracting Activity

Typed Name: _____ DSN: _____

Signature: _____ Date: _____

Parent topic: [5153.303 Agency forms.](#)