

Fabricator's PAL Material Receival Form

GS-13 Form 2

FAX to: 573-526-5636 or EMAIL to: PAL@modot.mo.gov For assistance call: 573-751-6735

Fabricator Name:							
FAX Number:			Phone Number:				
The following material has been r	received and may be used in	n MoDOT work	The mater	rial meets PAL	requirements.		
Material	Brand Name (may not apply)	Manufacturer		Arrival Date	Heat or Batch No.	Quantity & Units	PAL Ident. No. (Entered by MoDOT)
Name: Response Desired By:			Required for All Steel Products				
Title: Email Fax			I hereby certify that the steel referenced above is in compliance with Title 23, CFR, "Buy America Requirements" per MoDOT Specification				
Date:			Sec 106.9.				
Email address:			Signature:				