## PICA or SICA Management Level Change or Reassignment Request Worksheet (Replaces JLC Form 19)

| Part 1. To be completed by the requesting office |   |                         |           |  |
|--|---|-------------------------|-----------|--|
| 1. From (SVC Code, Mgt                           |   |                         |           |  |
| Code, Name, Address,                             |   |                         |           |  |
| Phone)   |   |                         |           |  |
| 2. To (SVC Code, Mgt                             |   |                         |           |  |
| Code, Address)                                   |   |                         |           |  |
| 3. National stock number                         |   |                         |           |  |
| (NSN)  |   |                         |           |  |
| 4. Primary part number                           |   |                         |           |  |
| 5. Application                                   |   |                         |           |  |
| 6. Item name                                     |   |                         |           |  |
| 7. NSN of suitable                               |   |                         |           |  |
| substitutes                                      |   |                         |           |  |
| 8. Unit price                                    |   |                         |           |  |
| 9. Actions recommended                           | Reassignment of PICA/SICA responsibility    |                         |           |  |
| by the PICA or SICA                              | From managing                               | activity code:          |           |  |
|  | To managing act                             | tivity code:            |           |  |
| 10. Change in                                    | Enter the proposed management level change: |                         |           |  |
| management level code                            | From:                                       | Ü                       | J         |  |
|  | To:   |                         |           |  |
| 11. Reason for request                           | Specify the reas                            | on.                     |           |  |
| The reason is request                            |   | nale for requesting the | e change. |  |
|  | Trovide are raile                           | maio ioi roquoomig mi   | o onango. |  |
| 12. Last 2 years demand                          |   |                         |           |  |
| 13. Quantity on hand                             |   |                         |           |  |
| 14.a. Quantity due in                            |   |                         |           |  |
| 14.b. Quantity due out                           |   |                         |           |  |
| 15. Item management                              |   |                         |           |  |
| code   |   |                         |           |  |
| 16. PICA data elements affected by the change    |   |                         |           |  |
| Enter the current and proposed PICA data         |   |                         |           |  |
| elements requiring the change:                   |   | From:                   | To:       |  |
| a. MOE rule *                                    |   |                         |           |  |
| b. NIMSC   |   |                         |           |  |
| b.1. Depot source of repair                      |   |                         |           |  |
| c. Catalog management data (CMD), e.g.,          |   |                         |           |  |
| acquisition advice code or repair code           |   |                         |           |  |
| d. Other codes                                   |   |                         |           |  |
| e. Note any continuing foreign military sales    |   |                         |           |  |
| (FMS) support requirements by inserting the      |   |                         |           |  |
| applicable FMS sponsor only                      |   |                         |           |  |

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| 17. SICA Data elements affected by the change |                                     |                               |                              |  |
|---|-------------------------------------|-------------------------------|------------------------------|--|
| Enter the current and proposed SICA data      |                                     |                               |                              |  |
| elements requiring the change:                |                                     | From:                         | To:                          |  |
| a. MOE rule *                                 |                                     |                               |                              |  |
| b. NIMSC                                      |                                     |                               |                              |  |
| b.1. Depot source of repair                   |                                     |                               |                              |  |
| c. Catalog management data (CMD), e.g.,       |                                     |                               |                              |  |
| acquisition advice code or repair code        |                                     |                               |                              |  |
| d. Other codes                                |                                     |                               |                              |  |
| e. Note any continuing foreign                |                                     |                               |                              |  |
| (FMS) support requirements                    | s by inserting the                  |                               |                              |  |
| applicable FMS sponsor only                   |                                     |                               |                              |  |
| 18. Point of contact                          | Name                                |                               |                              |  |
|   | Office symbol or                    | code                          |                              |  |
|   | DSN phone num                       | ber                           |                              |  |
| 19. Response due date                         |                                     |                               |                              |  |
| 20. Repair or overhaul                        |                                     |                               |                              |  |
| specification or publication                  |                                     |                               |                              |  |
| number  |                                     |                               |                              |  |
| 21. Estimated overhaul                        |                                     |                               |                              |  |
| cost  |                                     |                               |                              |  |
| 22. Estimated credit for                      | Enter 65 percent for NIMSC 5 items. |                               |                              |  |
| unserviceable returns                         |                                     |                               |                              |  |
| 23. Overhaul activity code                    |                                     |                               |                              |  |
| 24 & 25 Signature, name,                      |                                     |                               |                              |  |
| and title of requesting                       |                                     |                               |                              |  |
| official                                      |                                     |                               |                              |  |
|   | Signature                           |                               |                              |  |
|   | Name:                               |                               |                              |  |
|   | Title:                              |                               |                              |  |
| 26. Date                                      |                                     |                               |                              |  |
| * For additional information on MOE ru        | les, please reference DoD           | 0 4100.39-M - Volume 13 - FLI | S Procedures Manual Material |  |

Management Decision Rule Tables <a href="http://www.dlis.dla.mii/PDFs/Procedures/vol13.pdf">http://www.dlis.dla.mii/PDFs/Procedures/vol13.pdf</a>

## PICA or SICA Management Level Change or Reassignment Request Worksheet (Replaces JLC Form 19)

| Part 2. To be completed by the approving authority. |  |  |  |
|---|--|--|--|
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| ☐ Concur ☐ Nonconcur                                |  |  |  |
| Remarks to explain response:                        |  |  |  |
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| Signature   |  |  |  |
| Name:   |  |  |  |
| Title:  |  |  |  |
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