



City of Albuquerque

Telecommunications Management

Mobile Device Authorization Form

Date: _____

Department: _____	Division: _____
Activity Number: _____	Program: _____
Contact Name (Cell Phone Liaison): _____	Phone: _____

Cell Phone: (Please fill in ALL boxes that apply):

New Phone

1st Replacement Phone - Reason: _____

2nd Replacement Phone - Reason: _____

Note: Purchases > \$100 require CAO Approval, per the Mobile Device Policy
Requires justification below. Attach printout from Verizon webpage.

Model: _____ Cost \$ _____

<p>Calling Plan</p> <p><input type="checkbox"/> AMERICAS CHOICE II 400 SHARE EMAIL & DATA+N&W+IN UNL \$11.99</p> <p><input type="checkbox"/> AMERICAS CHOICE 100 SHARE \$30.75</p> <p><input type="checkbox"/> PTT AMERICA CHOICE \$24.99</p>	<p>Data Package</p> <p><input type="checkbox"/> 4G MOBILE BROADBAND UNLIMITED \$39.99</p> <p><input type="checkbox"/> MOBILE HOTSPOT \$10.00</p>
--	---

List all Accessories: (Please include cost of each)

This section MUST be completed before the order will be processed

Assigned to: _____ Job Title: _____

Business Need Justification: _____

Department Director Signature

CAO's Approval (if request exceeds \$100)

Department Fiscal Manager

Office of Management and Budget