

sities. Currently it is receiving from the various ministries and agencies between 500 and 1,000 requisitions per week for repair parts. Even though the depot is relatively new, it now supplies from its own stocks on a one- to two-day basis, over 50% of the parts requisitioned. The remainder of the parts requisitioned and not on hand are ordered from GSA or from U.S. Army Depot Command-Japan. The majority of the parts ordered from Japan arrive and are delivered to the requisitioner within 30 days. While this is by no means a completely satisfactory solution to the problem of repair parts, it represents excellent progress over the situation that existed in the past and does provide a solid foundation for continued improvement.

Parts catalogs and technical publications

The GVN central repair parts depot, in addition to its primary mission has the task of providing parts catalogs and technical manuals to the end users of mechanical equipment. The depot is using the services offered by the AID Regional Logistics Office in Tokyo in obtaining these publications. Action to obtain the publications is taken at the time equipment is ordered and normally the publications are on hand well in advance of the arrival of equipment. Action is also taken prior to the placing of orders for excess equipment to insure that repair parts are available to support the equipment. In instances where spare parts are not available, the age of the equipment under consideration,

COMPTROLLER GENERAL OF THE UNITED STATES,
Washington, D.C., October 25, 1967.

B-146995.

Hon. EREST GRUENING,

Chairman, Subcommittee on Foreign Aid Expenditures, Committee on Government Operations, U.S. Senate.

DEAR MR. CHAIRMAN: Herewith for the use of your Subcommittee is a copy of our report to the Agency for International Development on an examination

210 AID'S MISMANAGEMENT OF THE EXCESS PROPERTY PROGRAM

At the time of our visit in April 1967, responsible personnel of the Medical Center explained that the oxygen plant, which had arrived in October 1966, had not been tested because the Medical Center did not have anyone technically qualified to operate the plant. The Medical Center informed us that the liquid oxygen generated by this plant would have to be transformed to gas oxygen through the use of a converter before it could be used at the Medical Center. We were not able to establish whether the Medical Center officials had been aware of the supplies and equipment they ordered the oxygen plant.