



# Print Order Form 2511

You are hereby authorized to manufacture and ship the following described product in accordance with the purchase order and specifications indicated.

\* Required Fields

DEPARTMENT OR GOVERNMENT ESTABLISHMENT		REQ. NO. *	JACKET NO. *	PROGRAM NO. *	PRINT ORDER NO. *
PUBLICATION TITLE			DATE PREPARED	ESTIMATE (For GPO Use Only)	OBJECT CLASS
CONTRACTOR		PURCHASE ORDER NO. *	STATE CODE *	CONTRACTOR'S CODE *	SHIP/DELIVERY DATE *

BILLING ADDRESS CODE (BAC) *		AGENCY LOCATION CODE (ALC)		APPROPRIATION CHARGEABLE/OBLIGATION NO.					
<input type="checkbox"/> PURCHASE CARD	PURCHASE CARD NO. (Info to appear on GPO copy only)			EXP. DATE	NAME AS IT APPEARS ON PURCHASE CARD		PHONE NO. OF CARDHOLDER		
TAS: Sub-level Prefix Code	Allocation Transfer Agency Identifier	Agency Identifier	Beginning Period of Availability	Ending Period of Availability	Availability Type Code	Main Account Code	Sub-Account Code	BETC*	LINE OF ACCOUNTING/DOCUMENT REFERENCE NUMBER (Info Will Appear on IPAC as Entered)

PROOFS				DAYS DEPT. WILL HOLD PROOFS	QUALITY LEVEL	QUANTITY (unit of finished product)	
<input type="checkbox"/> Content (QTY) <input type="checkbox"/> Inkjet (QTY) <input type="checkbox"/> High Resolution (QTY) <input type="checkbox"/> Prior to Production Samples (QTY) <input type="checkbox"/> Electronic Soft Proof							
FURNISHED ELECTRONIC MEDIA			OTHER GOVT. FURNISHED MATERIALS		PRESS SHEET INSPECTION	TRIM SIZE	
<input type="checkbox"/> Files to be sent via FTP or Email <input type="checkbox"/> CD/DVD (QTY)					<input type="checkbox"/> No. of Hours Notice	X	
COVER PAPER		COLOR OF COVER INKS		COVER COATING TYPE	PAPER COVERS (Self) (Separate)	INDICATE WHICH COVERS PRINT	
TEXT PAPER		COLOR OF TEXT INKS		TEXT COATING TYPE	NUMBER OF TEXT PAGES	1 2 3 4	
FOLD-IN PAPER		COLOR OF FOLD-IN INKS		NO. OF FOLD-INS		PRINT	
						<input type="checkbox"/> One Side Only <input type="checkbox"/> Head to Head <input type="checkbox"/> Head to Foot	
STITCH		BINDING				PERFORATE	
<input type="checkbox"/> ULC <input type="checkbox"/> SIDE <input type="checkbox"/> SADDLE		<input type="checkbox"/> COMB <input type="checkbox"/> COIL <input type="checkbox"/> PERFECT BOUND <input type="checkbox"/> SEW <input type="checkbox"/> TAPE <input type="checkbox"/> TRIM 4 SIDES <input type="checkbox"/> OTHER				<input type="checkbox"/> SCORE	
PAD/SETS (Position)			(Sheets in Pad) (Sets in Pad) (Sheets in Set) (Chipboard Required)		DRILL _____ ROUND HOLES _____ INCHES IN DIAM. ON _____ SIDE _____ IN. CTR TO CTR.		
BAND UNITS OF _____			<input type="checkbox"/> PACK SUITABLE OR <input type="checkbox"/> QTY PER CONTAINER		<input type="checkbox"/> PALLETS REQUIRED		
SHRINK WRAP UNITS OF _____			CENTER OF HOLES _____ INCHES FROM _____ EDGE OF SHEET				

ADDITIONAL INFORMATION	<input type="checkbox"/> Supplemental Information Attached	
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DELIVERY	DELIVER PRODUCT TO:	RETURN FURNISHED MATERIALS TO:
	<input type="checkbox"/> Distribution List Attached	Digital Deliverables Requested - Format: <input type="checkbox"/> Native <input type="checkbox"/> PDF

ADDITIONAL SHIPPING INSTRUCTIONS FOR GPO COPIES		US Government Publishing Office, Documents Warehouse 8660 Cherry Lane, Laurel, MD 20707
_____ US Government Publishing Office (Use this address to send one copy) Federal Depository Library Program Mail Stop: FDLP 44 H St., NW, Loading Dock Washington, DC 20401 Item No. _____	_____ Library of Congress (QTY) US/Anglo Division U.S. Government Documents Section 101 Independence Ave., SE Washington, DC 20540-4274 Marked: Depository File Copies	_____ Marked for "Sales" Req. No. _____ (QTY) _____ Marked for "Subscription Stock" Req. No. _____ (QTY) <input type="checkbox"/> Individual Printed Mailing Containers are Required
_____ US Government Publishing Office (Use this address to send entire shipment) Federal Depository Library Program (FDLP) Document Warehouse 8660 Cherry Lane Laurel, MD 20707-4986 Item No. _____	_____ US Government Publishing Office (QTY) International Exchange Service (IES) Document Warehouse 8660 Cherry Lane Laurel, MD 20707-4986	Stock No. _____ Sub. ID No. _____ ISBN No. _____ (Shipping labels for "Sales" or "Subscription" copies must contain Stock No., Sub. ID No. and ISBN No. as indicated.)

FOR ADDITIONAL INFORMATION CONTACT:	EMAIL	PHONE NO.
AUTHORIZING SIGNATURE (must be on file with GPO)	TITLE	DATE SENT TO CONTRACTOR



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