

Renewal: If you are renewing your GPOExpress account(s), check this box and print or type your full name and sign at the bottom of this form.

Note: Sections 4-7 do not need to be completed if registering with a credit card.

1. Jacket Number _____

2. Date _____

3. Department/Government Establishment _____ 4. Bureau or Office _____

5. Requisition Number _____ 6. Billing Address Code (BAC) _____ 7. Agency Location Code (ALC) _____ 8. Line of Accounting (If applicable) _____

9. Treasury Account Symbol (TAS) / Business Event Type Code (BETC)	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*

10. Cardholder's Name	12. Email	13. Phone Number	14. GPOExpress Card Limit	15. Address
11. Cardholder's Title				16. City, State 17. Zip Code

To name additional cardholders, please continue on page 2.

18. Credit Card Information

Name on Credit Card _____ Credit Card Type _____

Credit Card Number (enter numbers only, no dashes) _____ Expiration Month _____ Year _____ Card Spending Limit _____ per _____

Billing Agency _____ Billing Street _____

Billing City _____ Billing State _____ Billing Zip Code _____

Cardholder Phone _____ Cardholder Email _____

If you do not want to fill out the above credit card information, please check this box and fill in your name and phone number to speak with a GPO representative.

Name _____ Phone _____

19. GPOExpress eView Administrator's Contact Name _____ 20. eView Administrator's Telephone Number _____ 21. eView Administrator's Email _____

22. Financial Contact's Name _____ 23. Financial Contact's Telephone Number _____ 24. Financial Contact's Email _____

25. Primary Contact's Name _____ 26. Primary Contact's Telephone Number _____ 27. Primary Contact's Email _____

28. Address _____ 29. City _____ 30. State _____ 31. Zip _____

I certify that I am an authorized agency representative of the above-mentioned Government establishment with authority to submit this order to the U.S. Government Publishing Office and obligate its funding in compliance with applicable regulations, and; this work is authorized by law and necessary to the conduct of the business of the above-mentioned Government establishment.

32. Name of Authorizing Official _____ 33. Authorizing Signature _____ 34. Title of Authorizing Official _____



Participation Request

1. Jacket Number _____

2. Date _____

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10. Cardholder's Name	12. Email	13. Phone Number	14. GPOExpress Card Limit	15. Address	
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