

PRINT ORDER

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

DEPARTMENT		REQ. NO.		DATE		PURCHASE ORDER NO.		PRINT ORDER NO.			
CONTRACTOR				JACKET NO.		ESTIMATED COST		SHIP/DEL DATE			
TITLE				OBJECT CLASS		STATE CODE		CONTR'S CODE			
PROOFS		SETS		DATE DUE TO GOV'T		DAYS GOV'T WILL HOLD		RETURN DATE TO CONTR.			
Galley											
Page											
Slugs											
MATERIAL FURNISHED TO CONTRACTOR						APPROPRIATION CHARGEABLE		BILLING ADDRESS CODE (BAC)			
Manuscript		Halftones		Line Illus.		Camera Copy		Negatives			
								Binders			
								Other			
TEXT STOCK				COVER STOCK				NO. OF TEXT PAGES (including blanks)		FOLD-IN STOCK	
FOUR COLOR PROCESS PRNTG.				INK				COVER PRINTS		FOLD-INS/FORMS	
Cover 1		2		3		4		Text		Face Only	
										Face & Back	
										STRIP-INS	
										NEGATIVES (No. req)	
BINDING	1 ULC		Sew		Band in Units of		Drill _____ Round Holes _____ " in diameter on _____ " side _____ inches c. to c.				
	Saddle		Trim 4 Sides		Shrink Film Wrap		Center holes _____ inches from _____ edge of sheet.				
	Side		Perf. on Fold		Other		Pads of _____ sheets/sets each. Pad on the _____ side. Chipboard required.				
	Perfect		Adhesive Strip				Pack _____ per shipping container. <input type="checkbox"/> Pallets required				
DISTRIBUTION						RETURN NEGS TO GPO FOR STORAGE NO <input type="checkbox"/> YES <input type="checkbox"/>					

RETURN ORIG. AND/OR NEGS. TO:

DEPARTMENTAL AUTHORITY (signature and title)		PURCHASE OBLIGATION		DATE SENT TO CONTRACTOR	
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CONTRACTOR TO COMPLETE BOTTOM PORTION AND MAIL ENTIRE FORM TO: COMPTROLLER-FME, FINANCIAL MANAGEMENT SERVICE, U.S. GOVERNMENT PRINTING OFFICE, WASHINGTON, DC 20401

Contractor Invoice No. _____ Date Prepared _____

Date of Delivery/Shipment _____ Discount Terms _____

ARTICLES OR SERVICES	QUANTITY	COST	UNIT PRICE PER	AMOUNT
IF ADDITIONAL SPACE IS REQUIRED USE STD FORM 1034, 1035, OR ATTACH YOUR INVOICE			TOTAL	

I CERTIFY THAT THE MATERIALS, GOODS, OR SERVICES HAVE BEEN DELIVERED/SHIPPED ON THE DATE INDICATED ABOVE, AND THAT PAYMENT OR CREDIT HAS NOT BEEN RECEIVED.

(Signature of person authorized to sign)