

PRINT ORDER

PROGRAM	PRINT ORDER	JACKET	OBJECT CLASS	ESTIMATED COST	DATE
DEPARTMENT	REQUISITION	BAC	TITLE		FORM
CONTRACTOR			PURCHASE ORDER	AREA STATE CODE	CONTRACTORS CODE

QUANTITY (SETS plus/minus per contract)	DETACHED SIZE <input type="checkbox"/> 8 x 5-1/4" <input type="checkbox"/> 8 x 5" <input type="checkbox"/> 8 x 10-1/2"	CATEGORY 1 <input type="checkbox"/> 8-1/2 x 5-1/2"	CATEGORY 2 <input type="checkbox"/> 8-1/2 x 11"	BIND* With Stub <input type="checkbox"/> Without Stub <input type="checkbox"/>
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PART	PAPER			COPY DESIGNATION	PRINT HEAD TO	TYPE OF CHANGE		BASE INK COLOR		BIND *
	Color	Kind	Substance	<input type="checkbox"/> base ink color <input type="checkbox"/> red ink		Face	Back	Face	Back	
1										
2										
3										
4										
5										
6										
7										
8										
9										

* R = Right hand edge, L = Left hand edge, T = Top edge (head of form, B = Bottom edge (foot of form).

FURNISHED MATERIAL Sample Dummy

Face- Negatives Camera/Reprint Copy Manuscript/Reprint

Back- Negatives Camera/Reprint Copy Manuscript/Reprint

CARBON PAPER AND REMOVAL

Carbon color black or blue

Full stub length _____ " short at Top Bottom Left Right

To be filled in by Pencil Typewriter Ballpoint Pen

PUNCH OR DRILL

No. Holes	Diameter (Inches)	Inches C. to C.	Location-To center of hole

SCHEDULE Furnished material will be picked up at the GPO and this material will be available for pickup _____

MARGINS (Inches)

	Head	Foot	Left	Right
Face-				
Back-				

Follow Sample Copy

PROOFS Submit _____ sets Send proof and copy to-

of proofs on or before _____

Sets will be withheld no more than _____ workdays until made available for pickup at GPO.

NUMBER

_____ List missing numbers

DISTRIBUTION

Unless indicated below, all sets will be shipped from the contractor's plant on or before the date specified.

Deliver - Sets must be delivered on board the destinations(s) specified on or before the date specified

UNIT PACKING

Wrap Box Band Shrink film pack in units of _____ sets

BULK PACKING

suitable NTE _____ lbs. _____ sets

Palletizing Packing List Special labeling Bar Coding

Distribute _____ sets on or before _____

Distribute complete order on or before _____

SHIPPING INSTRUCTIONS:

See attached Distribution List for _____ addresses

FOR INFORMATION CONCERNING THESE SPECIFICATIONS CALL _____ (No Collect Calls)

CONTRACTOR