

DOD PRINTING REQUISITION/ORDER		CLASSIFICATION <i>(Requisition automatically becomes "UNCL" when detached from classified material.)</i>		FOR PLANT					
REQUISITION NO.	DATE OF REQUEST	REQUESTED DEL'Y	EST. COST		(PLANT JOB NUMBER)				
FOR REFERENCE CONSULT			PHONE		SCHEDULED COMPLETION DATE	ESTIMATED COST			
ACCOUNTING DATA									
FORM/PUBLICATION NO. AND TITLE <i>(In that order)</i>									
QTY. <i>(Specify shts, sets, etc.)</i>	PAGES	QTY. WILL LAST MOS.	JOB TO BE REPRINTED <input type="checkbox"/> YES <input type="checkbox"/> NO	JOB IS <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> A REPRINT	LAST JOB NO.				
ENCLOSURES <i>(Submit clean, well protected copy)</i>		<i>(If other, specify)</i>		PROOFS <i>(Specify only if necessary)</i>					
PAGES COPY	NEGA-TIVES	PLATES		<input type="checkbox"/> NOT REQ'D	SEND TO:				
SPECIAL INSTRUCTIONS	FINISHED SIZE X	MARGINS <i>(Top)</i>	<i>(Left/Bind)</i>	INK <i>(If not black)</i>	GRADE OF PAPER*	WEIGHT*	COLOR*		
	FOLD TO <i>(Size)</i> X	PRINT <input type="checkbox"/> ONE SIDE <input type="checkbox"/> HEAD TO HEAD <input type="checkbox"/> HEAD TO FOOT <input type="checkbox"/> OTHER <i>(SEE COPY ATTACHED)</i>			1.				
	ASSEMBLE <input type="checkbox"/> IN SETS <input type="checkbox"/> PAGE SEQ.	WIRE STITCH <i>(Staple)</i> Number Stitches: <input type="checkbox"/> UPPER LEFT <input type="checkbox"/> TOP <input type="checkbox"/>		OTHER <i>(Specify)</i>		2.			
	STANDARD PUNCH <i>(Drill)</i> <input type="checkbox"/> 2-HOLE TOP <input type="checkbox"/> 3-HOLE LEFT	OTHER	<i>(Diameter)</i>	<i>(Ctr. to ctr.)</i>	<i>(Location)</i>	3.			
	PERFORATE/SCORE <input type="checkbox"/> SEE COPY	PAD SHTS SETS <input type="checkbox"/> TOP <input type="checkbox"/> LEFT	<i>(Location)</i>		PRONG FASTENERS <input type="checkbox"/> YES <input type="checkbox"/> NO	4.			
	COMPOSING/PROCESSING <i>(Prepare/alter copy; fotolist; offset; etc.)</i>			WRAP <i>(No. per pkg.)</i>	*NOTE: Grades and weight of paper will be in accordance with specifications issued by the Congressional Joint Committee on Printing. No deviations permitted unless justified.				
					DISPOSITION OF NEGS. _____ ORIG. _____	H-HOLD D-DESTROY R-RETURN			
FOR PLANT USE ONLY					SPECIAL INSTRUCTIONS/REMARKS				
NUMBER ORIG.	LINE H.T.					SERIAL NUMBERING, REGISTRATION, ETC.			
IMAGE SIZE X									
PRESS	PLATES								IMP
PRESS SHEET SIZE									
TRIM SIZE									
PLANNED BY									
ORDERING OFFICE <i>(If other than delivery address)</i>									DELIVER TO <i>(Complete address)</i>
LIAISON OFFICE APPROVAL <i>(Signature and date)</i>									
APPROVING OFFICE <i>(Signature and date)</i>									
SEND CONFIRMATION/BILLING COPY TO <i>(Insert complete mailing address)</i>									
					DISTRIBUTION REQUIRED <input type="checkbox"/> LIST / <input type="checkbox"/> LABELS ATTACHED				
					WILL PICK UP - PLEASE NOTIFY: <i>(Ext.)</i> <input type="checkbox"/> HOLD				
					MATERIAL RECEIVED <i>(Signature and date)</i>				