

MATERIAL FURNISHED				JOB CONTROL NUMBER	
JOB TITLE					
<input type="checkbox"/> CAMERA COPY _____	<input type="checkbox"/> MAILING LABELS _____	<input type="checkbox"/> DISKETTE _____ <small>(Complete GPO Form 952)</small>	REPRINT <input type="checkbox"/> Yes <input type="checkbox"/> No		FORM OR PUB NO.
<input type="checkbox"/> MANUSCRIPT _____	<input type="checkbox"/> PHOTOGRAPH _____	<input type="checkbox"/> OTHER _____			
<input type="checkbox"/> NEGATIVES _____	<input type="checkbox"/> SLIDES _____				

SERVICES REQUESTED				DATE IN:	DATE DUE:
<input type="checkbox"/> PLANNING CONFERENCE REQUESTED	<input type="checkbox"/> PHOTOGRAPHY	<input type="checkbox"/> COPY CENTER			
<input type="checkbox"/> GRAPHICS	<input type="checkbox"/> PRINTING	<input type="checkbox"/> DISTRIBUTION			

PRINTING/COPYING										
		PUNCHING			TEXT		BINDING			
PAGES OF COPY	QUANTITY	NO. OF HOLES	SIZE OF HOLES	SPACING	INK	PAPER				
PRINT		TRIM SIZE		FOLD TO		COVER				
<input type="checkbox"/> ONE SIDE ONLY						INK	PAPER			
<input type="checkbox"/> HEAD TO HEAD <input type="checkbox"/> HEAD TO FOOT										
						<input type="checkbox"/> COLLATE* <input type="checkbox"/> TAPE* <input type="checkbox"/> STAPLE (1 or 2)* <input type="checkbox"/> PADDING <input type="checkbox"/> PERFECT BOUND <input type="checkbox"/> SADDLE STITCH <input type="checkbox"/> COMB BINDING* <small>*Inhouse Binding Capability</small>				

GRAPHICS/PHOTOGRAPHY											
<input type="checkbox"/> VUGRAPHS _____ Each Total _____		<input type="checkbox"/> B&W COPY Total _____		<input type="checkbox"/> ILLUSTRATION		<input type="checkbox"/> COVER		<input type="checkbox"/> PROOF			
<input type="checkbox"/> 35/MM SLIDES _____ Each Total _____		<input type="checkbox"/> COLOR COPY Total _____		<input type="checkbox"/> BROCHURE/FLYER		<input type="checkbox"/> LINE ART		By: _____			
				<input type="checkbox"/> MASTHEAD/STATIONERY		<input type="checkbox"/> FORMS		Date: _____			
				<input type="checkbox"/> EXHIBITS (Specify Below)		<input type="checkbox"/> OTHER (Specify Below)					
<input type="checkbox"/> CERTIFICATES Total _____		<input type="checkbox"/> MOUNT <input type="checkbox"/> LAMINATE		<input type="checkbox"/> PHOTOGRAPHER (Note: Date/Time/Location Below)				GOVERNMENT ESTIMATE		WINNING BID	
<input type="checkbox"/> NAME TENTS Total _____		<input type="checkbox"/> POSTER/CHART Total _____		<input type="checkbox"/> PASSPORTS <input type="checkbox"/> B&W <input type="checkbox"/> COLOR <input type="checkbox"/> FILM PROCESS				COST	INITIAL/DATE	CODE	COST
<input type="checkbox"/> NAME TAGS Total _____		Size _____ X _____		<input type="checkbox"/> PORTRAIT <input type="checkbox"/> PHOTOSTATS							
				<input type="checkbox"/> OTHER (Specify Below) PRINT SIZE _____ X _____							

DISTRIBUTION/MAILING							
DIST. CONTROL NO.		<input type="checkbox"/> SINGLE MAILING <input type="checkbox"/> MULTIPLE MAILING <input type="checkbox"/> SINGLE/MULTIPLE MAILING		LABEL SOURCE		POSTAGE CLASSIFICATION:	
				<input type="checkbox"/> FURNISHED LABELS		<input type="checkbox"/> PRIORITY	
				<input type="checkbox"/> CHESHIRE <input type="checkbox"/> PRESSURE SENSITIVE <input type="checkbox"/> INK JET		<input type="checkbox"/> FIRST CLASS	
CONTRACTOR'S NAME				<input type="checkbox"/> DDS - MAILING LIST NO. _____		<input type="checkbox"/> SPECIAL FOURTH CLASS	
				<input type="checkbox"/> OTHERS		<input type="checkbox"/> BOOK RATE	
						<input type="checkbox"/> OTHER _____	

SUPPLEMENTARY INSTRUCTIONS					
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INITIALS				LOGGED IN BY	
<input type="checkbox"/> THIS ITEM IS A SCIENTIFIC/TECHNICAL DOCUMENT/APPROVED BY PA-1					
DOE REQUESTOR (Sign)			RECEIVED BY/DATE		
DOE REQUESTOR (Print)			ORG CODE	ROOM NO.	PHONE NO.
		ASSIGNED	FY	JOB CONTROL NUMBER	

INSTRUCTIONS

- Customer Information** The requestor, whose signature appears on the reverse side of this form, certifies that:
- He/she is an employee of the Department of Energy. (Contract Personnel do not have signatory authority).
 - This project represents official Government Business necessary to carry out an official assignment.
 - Work requested is not copyrighted, or if it is copyrighted, a release has been secured and is attached.
 - The maximum lead time has been allowed to minimize cost and guarantee quality.

Any document which is classified as a public communication publication, as prescribed within DOE 1340.1B, must be accompanied by a completed and approved DOE F 1340.3, "Request for Public Communications Publication Approval."

Classified Material If this project involves classified data, a detailed transmittal of classified material must be submitted, before work can be accepted.

Classified material can only be submitted through authorized Branch personnel who hold security clearances.

Classified Material Returned to: (<i>Signature</i>)	Date:
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