Simplified Purchase Agreement
Work Order Form 4044

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

*** Required Fields**

QUOTES DUE BY

DEPARTMENT OR GOVERNMENT ESTABLISHMENT	REQ. NO. *	JACKET NO. *	PROGRAM NO. *	WORK ORDER NO. *

CLASSIFICATION *	PUBLICATION TITLE	DATE PREPARED	OBJECT CLASS
Classified ☐ Yes ☐ No · SBU ☐ Yes ☐ No · PII ☐ Yes ☐ No			

CONTRACTOR	PURCHASE ORDER NO. *	STATE CODE *	CONTRACTOR'S CODE *	SHIP/DELIVERY DATE
Precision Printing, Inc		240	70722	

BILLING INFO

BILLING ADDRESS CODE (BAC) *	AGENCY LOCATION CODE (ALC)	APPROPRIATION CHARGEABLE/OBLIGATION NO.

☐ PURCHASE CARD	PURCHASE CARD NO. (Info to appear on GPO copy only)	EXP. DATE	NAME AS IT APPEARS ON PURCHASE CARD	PHONE NO. OF CARDHOLDER

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*	LINE OF ACCOUNTING/DOCUMENT REFERENCE NUMBER (Info Will Appear on IPAC as Entered)

G-INVOICING (GINV) GTC# **	GINV ORDER# **	ORDER LINE# **	ORDER SCHEDULE# **

****Must use number as generated by G-Invoicing system**

SPECIFICATIONS

PROOFS	DAYS DEPT. WILL HOLD PROOFS	QUALITY LEVEL	QUANTITY (unit of finished product)
☐ Content _____ (QTY) ☐ Inkjet _____ (QTY) ☐ High Resolution _____ (QTY) ☐ Prior to Production Samples _____ (QTY) ☐ Electronic Soft Proof			

FURNISHED ELECTRONIC MEDIA	OTHER GOVT. FURNISHED MATERIALS	PRESS SHEET INSPECTION	TRIM SIZE
☐ Files to be sent via FTP or Email ☐ CD/DVD _____ (QTY)		☐ No. of Hours Notice _____	X

COVER PAPER	COLOR OF COVER INKS	COVER COATING TYPE	PAPER COVERS (Self) ☐ (Separate) ☐	INDICATE WHICH COVERS PRINT 1 ☐ 2 ☐ 3 ☐ 4 ☐

TEXT PAPER	COLOR OF TEXT INKS	TEXT COATING TYPE	NUMBER OF TEXT PAGES	PRINT ☐ One Side Only ☐ Head to Head ☐ Head to Foot

STITCH ☐ ULC ☐ SIDE ☐ SADDLE

BINDING ☐ COMB ☐ COIL ☐ PERFECT BOUND ☐ SEW ☐ TAPE ☐ TRIM 4 SIDES ☐ OTHER

ADDITIONAL INFORMATION

Digital Print Acceptable? ☐ Yes ☐ No ☐ Supplemental Information Attached

DELIVERY

DELIVER PRODUCT TO:	RETURN FURNISHED MATERIALS TO:
☐ Distribution List Attached	Digital Deliverables Requested - Format: ☐ Native ☐ PDF

SUPT. DOCS. NOTIFIED ☐ YES ☐ NO	SUPT. DOCS. QUANTITY ORDERED	SUPT. DOCS. DELIVERY ADDRESS

CONTRACTOR TOTAL QUOTE	SUPT. DOCS. COST	ADDITIONAL RATE

FOR ADDITIONAL INFORMATION CONTACT:	EMAIL	PHONE NO.	FAX NO.

AUTHORIZING SIGNATURE	TITLE	DATE SENT TO CONTRACTOR

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.

ORDER RECEIVED BY: (Agency Representative) DATE ORDER RECEIVED

CONTRACTOR INVOICE

All contractor invoices are to be FAXED to GPO at **202.512.1851**. For instructions on how to prepare your bill and get paid go to **www.gpo.gov/vendors/payment.htm**

I certify that the materials/services ordered have been delivered on the date indicated above and that payment or credit has not been received.
The penalty for making false statements to the Government is prescribed in 18 USC 1001.

CONTRACTOR SIGNATURE	DATE

THIS FORM MUST BE FURNISHED TO GPO UPON SUBMISSION TO CONTRACTOR.

Simplified Purchase Agreement
Work Order Form 4044

DEPARTMENT OR GOVERNMENT ESTABLISHMENT	REQ. NO.	JACKET NO.	PROGRAM NO.	WORK ORDER NO.

PUBLICATION TITLE	BILLING ADDRESS CODE (BAC)

CONTRACTOR	PURCHASE ORDER NO.	STATE CODE	CONTRACTOR'S CODE
Precision Printing, Inc		240	70722

ADDITIONAL INFORMATION