

SF-1

PRINTING AND BINDING REQUISITION
to the Public Printer of the United States* Required
Fields

JACKET NO. (For GPO Use Only)

☐ Red
☐ Black
☐ Blue

REQUISITION NO. *

CLASSIFICATION *

Classified ☐ Yes ☐ No SBU ☐ Yes ☐ No PII ☐ Yes ☐ No

EXEMPT FROM REQUIRED DISTRIBUTION TO FEDERAL DEPOSITORY LIBRARIES

☐ Strictly for administrative or operational purposes ☐ Copyright restriction ☐ Not published with Federal funds

FROM (Department or Government Establishment)

BUREAU/OFFICE

PUBLICATION TITLE

QUALITY LEVEL

DATE PREPARED

QUANTITY (Units of Finished Product)

FINISHED PRODUCT

☐ Books/Pamphlets
☐ Pads☐ Forms (Sheets)
☐ CD/DVD☐ Labels
☐ Envelopes☐ Sets
☐ Other _____☐ Rush (Premium Surcharge Authorized)☐ Open Requisition

PREVIOUS JACKET/REQ. NO. (If Reprint)

FORM NO.

ISBN

IF AVAILABLE ONLINE

http://

THIS ORDER RIDES (Department)

(Requisition No.)

(Jacket No.)

STRAP WITH REQUISITION NO.

GPO IN-HOUSE SERVICES (Prior contact required for each service—attach estimate)

☐ Graphic and Multimedia Design ☐ Web Services ☐ Preflight ☐ Other _____

GPO In-House Distribution Services

☐ Mailing ☐ Storage ☐ Mailing List Maintenance

Security & Intelligent Documents

☐ Secure Federal CredentialsBILLING INFO
Component TAS/BETC

BILLING ADDRESS CODE (BAC) *

AGENCY LOCATION CODE (ALC)

APPROPRIATION CHARGEABLE/OBLIGATION NO.

☐ PURCHASE CARD

PURCHASE CARD NO. (Call for Card No.)

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)

PRE-PRESS & PROOFS

FURNISHED (Electronic media must include Form 952)

☐ Files sent via FTP or Email ☐ CD/DVD ☐ Copy ☐ Negative ☐ Other _____

Qty: _____

☐ Materials to be furnished by (date): _____

PROOFS

☐ Content (QTY) _____☐ Inkjet (QTY) _____☐ High Resolution (QTY) _____☐ Prior to Production Samples (QTY) _____☐ Electronic Soft Proof

DAYS DEPT. WILL HOLD PROOFS _____

PRESS SHEET INSPECTION

☐ No. of Hours Notice _____

DELIVER PROOFS TO (PO Box not acceptable, include contact phone number):

PAPER & INK

COVER PAPER (JCP number [If Known] and Grade, Color, Finish and Basis Weight)

COVER INK(S) (Black, 4-Color Process, Pantone #)

COVER COATING TYPE

☐ List Other Paper & Ink Materials Below in Additional Information

TEXT PAPER (JCP number [If Known] and Grade, Color, Finish and Basis Weight)

TEXT INK(S) (Black, 4-Color Process, Pantone #)

TEXT COATING TYPE

PRESS & BINDERY

DIGITAL PRINT ACCEPTABLE ☐ Yes ☐ No

PRINT

☐ One Side Only ☐ Head to Head ☐ Head to Foot

INDICATE WHICH COVERS PRINT

1 ☐ 2 ☐ 3 ☐ 4 ☐

EMBOSS

PERFORATE

SCORE

POSITION

NUMBERING (Inclusive)

Ink (Color)

SIZE FLAT (Inches) FORMS, SETS, PADS

FOLD TO (Inches)

SIZE TRIMMED PAGE (Inches) BOOKS/PAMPHLETS

NO. OF TEXT PAGES

PAPER COVERS (Self)

(Separate)

STITCH (Side)

(Saddle)

(ULC)

PASTE ON FOLD

LOOSELEAF

TAPE

COMB

COIL

PERFECT BOUND

SEW

CASE BOUND

(Material and Color)

PAD/SETS (Position)

(Sheets in Pad)

(Sets in Pad)

(Sheets in Set)

(Chipboard Required)

CARBON INTERLEAVE

PUNCH/DRILL

(No. of Holes)

(Diam.)

(Inches Center to Center)

(Position)

STAMP TITLE (Bindery)

Cover

Spine

Foil

(Color)

Ink (Color)

COLLATE (Explain)

TAB DIVIDERS (Height of Tab)

Width of Cut (1/5 etc.)

(Position)

PACKAGING & DELIVERY

REQUESTED DELIVERY DATE

KRAFT WRAP ☐ (QTY) _____SHRINK FILM ☐ (QTY) _____BAND IN SETS ☐ (QTY) _____SUITABLE ☐

OTHER PACKAGING (Specify) _____

PACK IN CARTONS ☐

DELIVER PRODUCT TO:

RETURN FURNISHED MATERIALS TO:

☐ Distribution List AttachedDigital Deliverables Requested - Format: ☐ Native ☐ PDF

ADDITIONAL INFORMATION

☐ Supplemental Information Attached

FOR ADDITIONAL INFORMATION CONTACT (Name)

TELEPHONE

☐ PRICE APPROVAL REQUIRED IF EXCEEDS \$ _____

EMAIL

FAX

ESTIMATE (For GPO Use Only)

INCLUDES FREIGHT ☐ Yes ☐ No

AUTHORIZING SIGNATURE (Must be on file with GPO) *

Title

I certify that this work is authorized by law and necessary to the conduct of the business of the above-mentioned Government establishment.

Standard Form 1, February 2014
Title 44 of the U.S. Code Control No. 1-110

FROM (Department or Government Establishment)	PUBLICATION TITLE
REQUISITION NO.	BILLING ADDRESS CODE (BAC)
ADDITIONAL INFORMATION	