NOAA Form 50-5A
(OCTOBER 2018)

U.S. DEPARTMENT OF COMMERCE
NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION

REQUISITION FOR DUPLICATING SERVICE

To: NOAA DUPLICATING PLANT, SSMC3, ROOM 3129, Silver Spring, MD 20910

Form Must Be Typed

CUSTOMER INFORMATION

Job No.: *(To be completed by Duplicating Plant)* | DATE PREPARED: | REQUESTED DELIVERY DATE: | TIME:

DOCUMENT USE: ☐ Public ☐ NOAA/DOC | AUDIENCE (if public): ☐ General Public ☐ Other *(specify)* _____

FREQUENCY OF REPRODUCTION (if public): ☐ One Time ☐ Bi-Weekly ☐ As Needed ☐ Other *(specify)* _____

FROM (Organization, Bldg., Room No.): | NAME, EMAIL & PHONE NO. OF PERSON TO CONSULT FOR QUESTIONS:

DOCUMENT TITLE: | PROOF RQD: ☐ Yes ☐ No

NO. OF PAGES: | QUANTITY: | TEXT STOCK: | COVER STOCK: | ☐ COLLATED ☐ UNCOLLATED | ☐ DIGITAL ☐ HARDCOPY ☐ MIXED

PAPER SIZE: ☐ 8.5" x 11" ☐ 8.5" x 14" ☐ 11" x 17" ☐ Other *(specify)* _____ | FOLD: ☐ Yes _____ ☐ Sample Attached

PRINT: ☐ Black & White ☐ Color | PAGE SETUP: ☐ ONE SIDE ONLY ☐ TWO SIDED ☐ MIXED ☐ HEAD TO FOOT

STAPLE: ☐ Portrait Upper Left Corner ☐ Landscape Upper Left Corner ☐ 2 Side ☐ Saddle Stitch | TAPE BINDING: ☐ Black ☐ Blue ☐ Foil Spine

HOLE PUNCH: ☐ 2-hole ☐ 3-hole
Select hole punch size: ☐ 5/16" ☐ 3/8" | COIL BINDING: ☐ Black ☐ Blue | ☐ Perfect Binding

ADDITIONAL INSTRUCTIONS: | NO. OF COPIES TO CLIENT _____ ☐ BALANCE TO DISTRIBUTION ☐ Labels Attached

ACCS ACCOUNTING CODE *(Sample P8P2ABC P00 00 01 0001 00 00 00 00 24 15 00 00)*:

CONTROL NO.	PROJ. NO.	TASK NO.	ORG 1	ORG 2	ORG 3	ORG 4	ORG 5	ORG 6	ORG 7	OCC 1	OCC 2	OCC 3	OCC 4
										24	15	00	00
☐ Other:			-	-	-	-	-	-	-	24	15	00	00

APPROVING OFFICIAL (Print Name): | SIGNATURE OF APPROVING OFFICIAL: | DATE:

BELOW THIS LINE TO BE COMPLETED BY DUPLICATING PLANT STAFF ONLY

FOR USE BY MANAGER: PRIORITY JOB ☐ DUE DATE: _____ DUE TIME: _____ JOB APPROVED: _____
RELEASE DATE: _____ RELEASE TIME: _____

COPIES: _____	MACHINE NO.	OPERATOR	BW PAGES	BW IMPRESSIONS	BW SETUP/WASTE	COLOR PAGES	COLOR IMPRESSIONS	COLOR SETUP/WASTE
CUT TO SIZE / YIELD: _____ / _____								
DATE RECEIVED: TIME:								
DATE JOB COMPLETED: TIME:								
TOTAL COST:								
		TOTALS	0	0	0	0	0	0

Reset Totals

For questions concerning completing this form call the Print Assistant at (301) 628-1485

SUPERSEDES NOAA Form 50-5A (08/12)