

For additional information, call 404-331-3246 or FAX your order to 404-331-0969

A. Customer Information		
Ordering Agency:		
Contact Person:		
Telephone: FAX Numb	oer:	
B. Billing Information		
Form of Payment to GSA:GSA Invoice _	I.M.P.A.C. Credit Card	
GSA Price Quote: \$		
Appropriation Code:		
Billing Office Activity Code (BOAC):		
INVOICE ADDRESS:	SHIPPING ADDRESS:	
		_
	_	
Type of Seal:FoamMetal: (Bron	ze orAluminum)	
Seal Size:15 inch 23 inch 30 inch _	Other:	
Quantity Requested:		
With Ring orWithout Ring		
* Stars * in between Lettering (see custom option)	<u>ons)</u>	
Antique Bronze FinishOther Finish:		
No Lettering Required		

Required Lettering (i.e., United States District Court):
UPPER RADIUS LETTERING:
LOWER RADIUS LETTERING:
Authorized Signature:
(if using worksheet in lieu of purchase order)
For Credit card Payments, please complete the following:
Credit card Number:
Expiration Date:
Type of Card:VISA MastercardAmerican Express
Print Cardholder Name:
Cardholder Signature:
FAX your order to 404-331-0969