

ORDER FOR SUPPLIES OR SERVICES						PAGE	OF	PAGES
IMPORTANT: Mark all packages and papers with contract and/or order numbers.								
1. DATE OF ORDER		2. CONTRACT NO. <i>If any</i>		6. SHIP TO:				
3. ORDER NO.		4. REQUISITION/REFERENCE NO.		a. NAME OF CONSIGNEE				
5. ISSUING OFFICE <i>Address correspondence to</i>				b. STREET ADDRESS				
7. TO:				c. CITY			d. STATE	e. ZIP CODE
a. NAME OF CONTRACTOR				f. SHIP VIA				
b. COMPANY NAME				8. TYPE OF ORDER				
c. STREET ADDRESS				<input type="checkbox"/> a. PURCHASE REFERENCE YOUR: _____ <small>Please furnish the following on the terms and conditions specified on both sides of this order and one the attached sheet, if any, including delivery as indicated.</small>		<input type="checkbox"/> b. DELIVERY - Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.		
e. STATE f. ZIP CODE				10. REQUISITIONING OFFICE				
9. ACCOUNTING AND APPROPRIATION DATA								
11. BUSINESS CLASSIFICATION <i>(Check appropriate box(es))</i>								
<input type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED								
12. F.O.B. POINT		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE <i>(Date)</i>		16. DISCOUNT TERMS		
13. PLACE OF								
a. INSPECTION		b. ACCEPTANCE						
17. SCHEDULE <i>(See reverse for Rejections)</i>								
ITEM NO. (a)	SUPPLIES OR SERVICES (b)			QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.				
21. MAIL INVOICE TO:								
a. NAME								
b. STREET ADDRESS <i>(or P.O. Box)</i>								
c. CITY				d. STATE	e. ZIP CODE			
22. UNITED STATES OF AMERICA BY <i>(Signature)</i>						23. NAME <i>(Typed)</i>		
TITLE: CONTRACTING/ORDERING OFFICER								
SEE BILLING INSTRUCTIONS ON REVERSE						17(h) TOT. <i>(Cont. pages)</i>		
						17(i) GRAND TOTAL		

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OPTIONAL FORM 347 (REV. 6/95)
Prescribed by GSA/FAR 48 CFR 53.213(e)