

## Requisition for Forms or Publications

**ATF Use Only**

Note: To better serve you, please: 1. Order a year's supply at a time, if possible. 2. Keep a copy of this order for your records.			<b>Order Number:</b>
<b>Send To:</b> ATF DISTRIBUTION CENTER 13882 REDSKIN DRIVE HERNDON, VA 20171	1. Date Requested	2. User's Requisition Number	
3. For Information Call ( <i>Name, Tel. No., Ext.</i> )			

4. Delivery  Normal  Priority \_\_\_\_\_  
*(Specify)* *(Delivery Date)*

5. Supervisor Approval \_\_\_\_\_ 6. Office Code \_\_\_\_\_

Form or Publication No.	Title or Description	Quantity Requested	Quantity Furnished
<b>Total:</b>			

**Delivery Address**

Name \_\_\_\_\_

Complete Street Address (*Exclude P.O. Box and Route Numbers*) \_\_\_\_\_

City, State and Zip Code \_\_\_\_\_

**Paperwork Reduction Act Notice**

This request is in accordance with the Paperwork Reduction Act of 1995. The information requested on this form is necessary to fulfill requests from the public for various forms and publications concerning firearms and explosives. The supplying of information by the respondent is involuntary.

The estimated average burden associated with this collection of information is 3 minutes per respondent or recordkeeper depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be addressed to Reports Management Officer, Document Services, Bureau of Alcohol, Tobacco, Firearms, and Explosives, Washington, DC 20226.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.