Form 2333 X (Rev. September 2010)	Department of Treasury – Internal Revenue Service SPEC SUPPLEMENTAL ORDER FORM					NDC Use Only ELITE Order Number		
1. Date (mm/dd/yyyy)		(Review Instructions Before Ordering)						
2. Contact's Name	1	3. Telephone Number				Order Point Number (five digits)		
( ) ext.								
4. Organization (Organization Name/Bldg./Room/Floor)						10. SPEC Contact Person		
5. Shipping Address						11. SPEC Contact's Telephone Number		
					(	)	ext.	
6. City			7. State	8. ZIP Co	de 12.	Alternate	e SPEC Contact Name	
* Only products <b>NOT</b> listed	on the F 2333 TE or F	2333 V will be proces	ssed on this order	form.	13.	Alternate	e's Telephone Number ext.	
<b>Catalog No.</b> (i.e. 15142 B)	Quantity	Short Title (i.e. P 575)	Catalog (i.e. 151	<b>g No.</b> 142 B)	Quantity		Short Title (i.e. P 575)	

## **INSTRUCTIONS**

## Form 2333 X, SPEC Supplemental Order Form

When ordering please follow these guidelines (orders may be shipped in multiple shipments).

- **Box 1 Date** (*Required*) Enter today's date (mm/dd/yyyy).
- **Box 2** Contact Name (Required) Enter the name of the person receiving the order.
- **Box 3** Telephone Number (*Required*) Enter the 10-digit telephone number (ex: (555) 111-1111) and extension if applicable of the person receiving the order.
- **Box 4 Organization** (*If needed*) Enter your Organization Name, Building, Room Number and Floor.
- **Box 5** Shipping Address (*Required*) Enter your complete street address or PO Box (ex: PO Box 123, 1234 Main St, Ste. 5).
- **Box 6 City** (Required) Enter your city.
- **Box 7 State** (*Required*) Enter your 2-letter state identifier.
- **Box 8 Zip Code** (*Required*) Enter your zip code.

## SPEC use only.

- Box 9 Order Point Number (Required) Enter your Order Point Number (five digits).
- **Box 10** SPEC Contact Person (Required) Enter your first and last name.
- **Box 11 SPEC Contact's Telephone Number** (*Required*) Enter your 10-digit telephone number number (ex: (555) 111-1111) and extension if applicable.
- **Box 12** Alternate SPEC Contact Name (Required) Enter alternate contact name.
- **Box 13** Alternate SPEC Telephone Number (*Required*) Enter alternate's 10-digit telephone number (ex: (555) 111-1111) and extension if applicable.

<sup>\*</sup> Only products **NOT** listed on the F 2333 TE or F 2333 V will be processed on this order form.