FMC 14 (REV. 9/2011)

ELECTRONIC STANDARD FORMS PRODUCT ORDER

Print Clear

STATE OF CALIFORNIA - DEPARTMENT OF GENERAL SERVICES
FORMS MANAGEMENT CENTER

Please choose one ordering method only: Mail ☐ Fax ☐ Walk-in ☐

FORMS MANAGEMENT CENTER
Office of State Publishing (IMS P-6)
344 North 7th Street
Sacramento, CA 95811-0291

Service Center:
(916) 324-4635 or
Toll-Free: 1-800-964-3214
FAX: (916) 324-9908

PAPER STD. FORMS: These forms are stored in prepackaged quantities. For pricing information, please visit www.dgs.ca.gov (In the Quick Links block, click on STD. Forms Search, then click on STD. Paper Forms Price List).

LOW-USE STD. FORMS: These forms are not stored in the Forms Management Center's warehouse – they are printed per customer order.

AUTOMATED STD. FORMS: These forms may be installed on the computing infrastructure of a governmental agency.

ORDERING INSTRUCTIONS: Fill out the Electronic Standard Forms Product Order completely. Orders not properly completed will be returned. If you submit an order, do **NOT** resubmit. Turn-around time on your order is approximately 10 working days from receipt by the Forms Management Center. The Forms Management Center will not be responsible for duplicate orders submitted. **Back-ordered items will be shipped when available.**

DUPLICATE ORDERS: Unless the error is on the part of the Forms Management Center, duplicate orders will be charged.

IF THERE ARE ANY PROBLEMS WITH YOUR ORDER:

- You must contact the Forms Management Center within ten (10) working days after receipt of the order. A Notice of Exceptions will be forwarded to you.
- Authorized returns must be received within 30 days after receipt of order with a completed Notice of Exceptions.
- If you have an Erroneous Order, please referrence FMC Policy # 005 for procedures to remedy this situation.

WALK-IN ORDER HOURS: 8 AM – 3:30 PM (Monday – Friday). Quantities may be limited. First, contact the Forms Management Center's Service Center. A Service Specialist will describe how to proceed. You must provide 24-hour advance notice prior to walk-in pick-up.

If your office has moved OR if you are using a new billing code, call Service Center prior to submitting this order to change/establish a Delivery Address Code.	OFFICER AUTHORIZING EXPENDITURE *(Signature)*	ORDER DATE	DELIVERY ADDRESS CODE (Not your IMS Code)
SHIP TO: DEPARTMENT	PLEASE PRINT OR TYPE AUTHORIZING OFFICER'S NAME	AGENCY BILLING CODE	
OFFICE	CONTACT'S NAME	AGENCY INTERNAL ORDER NUMBER (Optional)	
ADDRESS (NO PO BOX)	CONTACT'S EMAIL ADDRESS	ORDERS RECEIVED AFTER JUNE 15 WILL BE BILLED THE FOLLOWING FISCAL YEAR.	
CITY, STATE, ZIP	CONTACT 'S TELEPHONE NUMBER ( )	**Backordered items will be shipped automatically when available**	

☐ Adobe Acrobat ☐ FormFlow Filler

PRODUCT CODE	QUANTITY	UNIT ORDER	DESCRIPTION	UNIT PRICE	PRICE EXTENSION
		DISK		$150.00	

COMMENTS/OTHER INFORMATION

TOTAL $