Bureau of Alcohol, Tobacco, Firearms and Explosives

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				Order Number:
Send To: ATF DISTRIE	BRANCH DRIVE	1. Date Requested 2. U	ser's Requisition Number	
LANDOVER, MD 20785-3816		3. For Information Call (Name, Tel. N	o., Ext.)	
4. Delivery	Tormal Prio	rity		
(Specify)			(Delivery Date)	
5. Supervisor Approval			6. Office Code	
Form or Title or Description			Quantity	Quantity
Publication No.	Title of Description		Requested	Furnished
			Total:	
		Delivery Address		
Name				
Complete Street Address (Exclude P.O. Box and Route Numbers)				
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City, State and Zip Code				
City, State and Zip Code				
		Paperwork Reduction Ac	t 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 voluntary.

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.