

PLEASE TYPE INFORMATION

FORM BC-1868(EF)
(11-9-2010)

U.S. DEPARTMENT OF COMMERCE
Economics and Statistics Administration
U.S. CENSUS BUREAU

REQUEST FOR OFFICIAL CERTIFICATION

Section I - CONTACT INFORMATION - (Complete items 1-5)

1. Today's date		2. Date needed	
3. Contact			
a. Name		b. Company	
c. Address 1			
d. Address 2			
e. City		f. State	g. ZIP Code
h. Telephone number		i. Fax number	
j. E-mail address			

4. Detailed explanation of your certification request *(List exact tables or furnish examples, etc., if possible):*

If more space is needed, use a blank page to continue and be sure to put your name at the top.

5. Where to send this request *(If you have any questions, please phone 1-800-923-8282).*

E-mail to: Clmso.Certify.List@census.gov <i>(Attach form)</i>	Fax to: Customer Services Center/CLMSO 301-763-3842
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Section II - FOR INTERNAL USE ONLY - Do NOT write below this line

Line 1	Tracking number	Date received
Line 2	Division assigned	Name Telephone number Date sent to division
Line 3	Code	Comments Price \$
Line 4	Customer approval	<input type="checkbox"/> Yes <input type="checkbox"/> No Date customer returned approval
Line 5	Date order entered	Order number
Line 6	DIV to CQAS date	
Line 7	CQAS to CLMSO date	CQAS tracking code
Line 8	Date product sent to customer	FedEx tracking code