
INSTRUCTIONS

Supplemental Order for SPEC

When ordering please follow the instructions listed below (orders may be shipped in multiple shipments).

Send completed Form 2333 X to: *ndc.spec.orders@irs.gov for processing.

- Box 1** **Date** (*Required*) - Enter in the date (MM/DD/YYYY format) or select from the drop-down calendar.
- 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** (*Required*) - 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 phone number** (*Required*) - Enter your 10-digit telephone number (ex: (555) 111-1111) and extension if applicable.
- Box 12** **SPEC contact's email address** (*Required*) - Enter your e-mail address.
- Box 13** **Alternate SPEC contact name** (*Required*) - Enter alternate contact name.
- Box 14** **Alternate SPEC telephone number** (*Required*) - Enter alternate's 10-digit telephone number (ex: (555) 111-1111) and extension if applicable.

* Only products **NOT** listed on the F 2333 TE or F 2333 V will be processed on this order form.