

Shipping List Number: 2011-0408-M

Ship List Date 9/29/2011

Delivery Date 10/31/2011

81701-

P.O. Number 81702

Program 0562-S

PAGE 1 OF 1

Claims for nonreceipt of publications on this list under item numbers previously selected by a library must be made within 60 calendar days of receipt of this shipment. When filing a claim for missing publications, please return a copy of this list on which they appear and circle the item numbers that are missing.

ITEM NO.	CLASSIFICATION NO.	TITLE
0996-B	Y 1.1/7:112-42/PT.1	STATEMENT OF DISBURSEMENTS OF THE HOUSE... HOUSE DOC. 112-42, PT. 1 OF 3... U.S. CONGRESS, 112TH CONGRESS, 1ST SESSION
	Y 1.1/7:112-49	CONTINUATION OF EMERGENCY REGARDING,... THE PRESIDENT OF THE UNITED STATES... HOUSE DOC. 112-49... U.S. CONGRESS, 112TH CONG., 1ST SESSION
	Y 1.1/7:112-50	NOTIFICATION THAT AN EXECUTIVE ORDER,... THE PRESIDENT OF THE UNITED STATES... HOUSE DOC. 112-50... U.S. CONGRESS, 112TH CONG., 1ST SESSION
1008-D	Y 1.1/8:111-304	PROVIDING FOR CONSIDERATION OF THE BILL,... RPT... RPT. 111-304... U.S. CONGRESS, 111TH CONGRESS, 1ST SESSION
	Y 1.1/8:112-195	IN THE MATTER OF ALLEGATIONS RELATING,... RPT... RPT. 112-195... U.S. CONGRESS, 112TH CONGRESS, 1ST SESSION
1011-A	Y 4.AP 6/1:L 11/2012/PT.3	DEPARTMENTS OF LABOR, HEALTH AND HUMAN,... HRGS... PART 3... COM. ON APPROPRIATIONS, U.S. HOUSE OF REPS... 112TH CONGRESS, 1ST SESSION
1012-D-01	Y 4.AR 5/2 A:2011-2012/13	ARE WE READY? AN INDEPENDENT LOOK AT,... HRG... COM. ON ARMED SERVICES, U.S. HOUSE OF REPS... 112TH CONGRESS, 1ST SESSION
1031-B	Y 4.SM 1:112-024	INSOURCING GONE AWRY: OUTSOURCING SMALL,... HRG... COM. ON SMALL BUSINESS, U.S. HOUSE OF REPS... 112TH CONGRESS, 1ST SESSION

Number of Titles: 8

MAIL CLAIMS TO:

Data Management Internationale, Inc
55 Lukens Drive
New Castle, DE 19720
Fax: (302) 656-1169

Signature of Librarian authorized to make claim _____ LIB# _____

CLEARLY PRINT OR TYPE ADDRESS AND INFORMATION ON MAILING LABEL

U.S. GOVERNMENT PRINTING OFFICE
LIBRARY PROGRAMS SERVICES 9SLDM
WASHINGTON, DC 20401

Lib # _____ SL # _____
Institution _____
Address _____
City _____ State _____ Zip _____

Official Business