



NAME	PTO / DISTRICT ORG. / NON PROFIT ORG.	PHONE - EXT.
SIGNATURE	DATE SUBMITTED	DATE DESIRED
TITLE OF MATERIAL BEING REQUESTED		
PICK UP: Date / Time		

YOUR SIGNATURE IMPLIES ACCEPTANCE OF INSTRUCTIONS AND COPYRIGHT LAWS (Revised: May, 2010)

BILLING INFORMATION		
Name _____		
Organization _____		
Address _____		
City _____ State _____ Zip _____		

SPECIAL INSTRUCTIONS :

COPY CENTER USE	
Date _____	
Initial _____	
# Imp _____	
Due \$ _____	

PLEASE LIMIT PAPER CHOICE TO THREE COLORS PER ORDER

_____ # of Originals	PRINT:	SIZE:	PAPER COLORS:	CARD STOCK COLORS:
_____ # of Copies	<input type="checkbox"/> Front Only	<input type="checkbox"/> 8 1/2 x 11	<input type="checkbox"/> White	<input type="checkbox"/> White
_____ total half shts.	<input type="checkbox"/> Front & Back	<input type="checkbox"/> 8 1/2 x 14	<input type="checkbox"/> Blue	<input type="checkbox"/> Blue
_____ total qtr. shts.	<input type="checkbox"/> As Is	<input type="checkbox"/> 11 x 17	<input type="checkbox"/> Green	<input type="checkbox"/> Green
		<input type="checkbox"/> 8 1/2 x 5 1/2	<input type="checkbox"/> Pink	<input type="checkbox"/> Pink
			<input type="checkbox"/> Yellow	<input type="checkbox"/> Yellow
			<input type="checkbox"/> Red	<input type="checkbox"/> Red
			<input type="checkbox"/> Tan	<input type="checkbox"/> Tan
			<input type="checkbox"/> Orchid	<input type="checkbox"/> Orchid

FINISHING:

Stack (1,1,1) Collate (1,2,3)

Staple Single Dual

Bookletize (fold in half-dual staple)

Spiral Bind 3 - Hole Punch

Cut 1/2 1/3 1/4

Fold 1/2 1/3 1/4

Pads _____ Per Pad _____

SPECIALTY ITEMS:

Tabs (5 /set)

Business Cards

Design/Layout _____ hrs.

Certificate Paper

gray natural

NCR / CARBONLESS:

2 Part white,yellow

3 Part white,yellow,pink

(only available in 8.5 x 11)

COVERS:

Paper

Card Stock

Front Only

Front / Back

Booklet

Orders for letterhead, envelopes & other printing are referred to a local printer.

POSTERS, LAMINATION, FOAM BOARD:

	PRINT:	SIZE:
_____ # of Originals	<input type="checkbox"/> Full Color	<input type="checkbox"/> 18 in. Wd. X _____ Lgth
_____ # of Copies	<input type="checkbox"/> Black/White	<input type="checkbox"/> 24 in. Wd. X _____ Lgth
_____ Portrait	<input type="checkbox"/> Single Color	<input type="checkbox"/> 36 in. Wd. X _____ Lgth
_____ Landscape	<input type="checkbox"/> Layout/Design	<input type="checkbox"/> Other _____

LAMINATION or FOAM BOARD (circle)

FINISHING:

STOCK:	<input type="checkbox"/> 18 in. Wd. X _____ Lgth	<input type="checkbox"/> Cut _____
<input type="checkbox"/> Paper	<input type="checkbox"/> 24 in. Wd. X _____ Lgth	<input type="checkbox"/> Velcro _____
<input type="checkbox"/> Glossy	<input type="checkbox"/> 36 in. Wd. X _____ Lgth	<input type="checkbox"/> Grommets _____
<input type="checkbox"/> Vinyl	<input type="checkbox"/> Other _____	<input type="checkbox"/> String _____

FULL COLOR COPIES:

	SIZE:
_____ # of Originals	<input type="checkbox"/> 8 1/2 x 11
_____ # of Copies	<input type="checkbox"/> 8 1/2 x 14
_____ Portrait	<input type="checkbox"/> 11 x 17
_____ Landscape	<input type="checkbox"/> 8 1/2 x 5 1/2

STOCK

FINISHING:

<input type="checkbox"/> Paper	<input type="checkbox"/> CUT _____
<input type="checkbox"/> Card Stock	<input type="checkbox"/> Fold _____
PRINT	<input type="checkbox"/> Stack _____
<input type="checkbox"/> Front Only	<input type="checkbox"/> Staple _____
<input type="checkbox"/> Front & Back	

Please fill out request in its entirety. Send good clean originals (poor originals produce poor copies). Attach originals with paper clip to request. One request sheet per individual job. When appropriate, fill out billing information completely.