

PRINT CENTER REQUEST FORM

Name of person First, Last (RETAIN WHITE COPY)						School or SLC Dept.																			
<i>Tel:</i>																									
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center;">Account Number</th> <th colspan="2" style="text-align: center;">Date Submitted</th> <th colspan="2" style="text-align: center;">Date Latest Delivery</th> </tr> <tr> <td style="font-size: small;">Program</td> <td style="font-size: small;">Activity</td> <td style="font-size: small;">Object</td> <td style="font-size: small;">Location</td> <td style="font-size: small;">Dept.</td> <td style="font-size: small;">Resp.</td> </tr> <tr> <td></td> <td></td> <td style="text-align: center; font-weight: bold;">0700</td> <td></td> <td></td> <td></td> </tr> </table>						Account Number		Date Submitted		Date Latest Delivery		Program	Activity	Object	Location	Dept.	Resp.			0700				Name of Job Envelopes (#10, #10win, #6.3/4, 5 1/2Bar, 6X9, 10X13)	
Account Number		Date Submitted		Date Latest Delivery																					
Program	Activity	Object	Location	Dept.	Resp.																				
		0700																							
Total No. of copies _____ 1-Sided _____ 2-Sided _____			Bindery: 3-Hole Punch _____ Fold 1/2 _____ Tri _____ Cut _____			NCR: 2-Part _____ 3-Part _____ 4-Part _____ Uncollated _____																			
Paper: White _____ Color _____ Cover _____ Front _____ Back _____			Pad _____ Staple 1, 2, _____ Collate _____ Comb Bind _____			Finish Size _____																			
<div style="border: 1px solid black; height: 40px; margin-top: 5px;"> <p style="margin: 0;"><u>SPECIAL INSTRUCTIONS</u></p> </div>																									

DO NOT write below - PRINT SHOP USE ONLY (Sharp, Star, Riso, Color Copy) Impression _____

_____ No. of sheets _____ Cover Paper _____ / _____ **(P.T.S.A.)**

Hand Labor < Collate, staple, pad, cut, fold, Comb Bind, Punch, Perforate > _____ Other Labor _____

Additional Costs _____ Insert #1 _____ Insert #2 _____

Total Costs _____ Plain paper only _____ 10% 15% Charge _____

White: Customer Yellow: Print Shop Pink: Print Shop
PLEASE, REMOVE ALL STAPLES! Paper clip the order form to your originals. Rev. 12-13