

Printing Services Work Request

THIS SECTION MUST BE FILLED OUT COMPLETELY	?	In h. Niversha				
Date required Date of request		Job Number (leave blank)				
Department/Organization		Job title				
(Specify if personal work)		Call, if que	stions arise:			
5-Digit Cost Center Code		(individual) (telephone no.)				
		(Individual) (telephone no.) ☐ Call when ready, I will pick up job, or ☐ Deliver completed job to:				
Print Shop:		- Call Will	ch ready, i will pick up joo,	or a beliver comple	icu joo to.	
(Main Printing Center) (Copie	es Plus)		(individual)	(bldg.)	(room no.)	
PROCESS		TYPE OF S	TUCK	14/1-:4- Cl F1	04-4	
☐ Print one side ☐ Black Copy		8½ X 11 - 20#		White Gloss Enamel Coated (Recommended for Full-Color Printing)		
		1	20# □ Gray □ Blue	□ 80# Text □ 80# C		
☐ Print both sides ☐ Full-Color Copy		☐ Buff 〔	□ Green □ Gold □ Pink □ Ivory	□ 100# Text □ 65# Co	over 🔲 12 PT C2S	
This should that		Canary	a Fink a tvory	White Uncoated - Sm		
Total number of originals (two-sided copies count as two originals)		(Recommended for Full-Color Printing) 8½ x 11 − 110# Index □ 28# Bond □ 80# Text □ 100# Text				
Number of copies per original		_	☐ Green ☐ Blue	□ 60# Cover □ 80#	Cover □ 100# Cover	
			☐ Cherry ☐ Salmon			
If cutting is required, specify number of copies after cut		☐ Canary 〔	⊒ Gray	11 x 17 − 60# Offse		
Trim Size q 3 x 5 □ 4 x 6 □ 4½ x 5½ □ 5½ x 8½		☐ Turquoise	0# Vibrant Brights ☐ Sunburst ☐ Orange ☐ Red ☐ Lime	☐ Green ☐ Gr ☐ Goldenrod		
☐ Fold, right angle ☐ Perforate ☐ Stu ☐ Collate and Staple ☐ Number App.		8 ½ x 11 – White White Gray Invitation B 43/8 x 53/4 V 51/4 x 71/4 W 43/4 x 61/2 W 35/8 x 51/8 W	3 pt. □ 4 pt. □ 5 pt. 70# Text I Ivory □ Gold 10# Bond □ Ivory □ Canary □ Goldenrod Envelopes White Envelope White Envelope White Envelope White Envelope	B½ x 11 Ivory B½ x 11 Gray B½ x 11 Gray B½ x 11 Gray B10	11 x 17 Blue 11 x 17 Ivory 11 x 17 Gray Vindow	
DO NOT W	RITE BELOW THIS L	INE EXCEPT FOR	R PERSONAL WORK			
Social Sec. # or EMPL #	Tax Exempt # _		Printing Charges			
Organization			In-house stock charges			
C/O						
Billing Address			Auxiliary work			
			Prepress Work/Plates			
			Color ink and wash-up			
Printed by: Delivered: Picked-						
Logged out by: Date: Job ID#:			Other			
Finished Product Received by (Please Print):			Subtotal			
			Sales Tax			
Date Received: Amount of Cartons			:: Total Charges			