
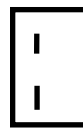
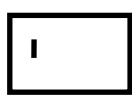
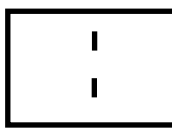
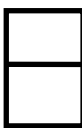

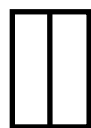


Requestor Name:				Location/School :			Phone:		
Acct Code	Fund (2)	Resource (4)	Location (3)	Yr (1)	Budget Mgr (2)	Object (4)	Goal (4)	Function (4)	Dist Def (3)
Delivery Instructions	Today's Date: _____ Requested Due Date: _____ Due Time: _____			FINISHED JOB TO BE RETURNED VIA:					
				<input type="checkbox"/> Pick Up : _____ <input type="checkbox"/> Delivery : _____			<input type="checkbox"/> Other (Specify) : _____ <input type="checkbox"/> Confidential Handling : _____		
Quantity	<input type="checkbox"/> RUSH DOCUMENT TITLE OR DESCRIPTION						NUMBER OF ORIGINAL PAGES	NUMBER OF COPIES REQUIRED	
Copying	ORIGINAL DOCUMENT SUBMITTED BY								
	<input type="checkbox"/> Hard Copy <input type="checkbox"/> Email Attachment : _____ <input type="checkbox"/> Workflow Scanning : _____ <input type="checkbox"/> USB Flash Drive : _____ <input type="checkbox"/> Other : _____								
	<input type="checkbox"/> Black & White Copies <input type="checkbox"/> Color Copies <input type="checkbox"/> Other _____ <input type="checkbox"/> Reduce Copy To 8½ X 11 <input type="checkbox"/> <u>One-sided</u> OR <input type="checkbox"/> <u>Two-Sided</u> Covers: <input type="checkbox"/> card stock: color _____ <input type="checkbox"/> Enlarge Copy To 11x17 UNCOLLATED OR COLLATED								
Paper selections	SIZE OF PAPER								
	<input type="checkbox"/> 8½ X 11 Plain <input type="checkbox"/> 8½ X 14 <input type="checkbox"/> 11 X 17 <input type="checkbox"/> Special Size (Specify and call for availability): _____								
Paper selections	TYPE OF STOCK								
	<input type="checkbox"/> Card Stock <input type="checkbox"/> Color Paper (Specify): _____ <input type="checkbox"/> Tab (Standard 1/5 th Cut) Carbonless Paper - 4 Part Maximum <input type="checkbox"/> 2-Part <input type="checkbox"/> 3-Part <input type="checkbox"/> 4-Part								
	<input type="checkbox"/> Other (Specify) _____								
Finishing	FINISHING								
	<input type="checkbox"/> 3 Hole Left Drilled <input type="checkbox"/> 2 Hole Top Drilled <input type="checkbox"/> Cutting: _____ Padding: <input type="checkbox"/> Top (or) <input type="checkbox"/> Left Side <input type="checkbox"/> Slipsheet <input type="checkbox"/> Shrink-wrap <input type="checkbox"/> Rubber Banded								
	<input type="checkbox"/> Tape Bind <input type="checkbox"/> Other (describe in special instructions)								
Finishing	<input type="checkbox"/> Stapling - Select One:			<input type="checkbox"/> Booklet-making			<input type="checkbox"/> Folding - Select One:		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
									
Special Inst									
Xerox Use	Total Blk/Wht: _____ Total Color: _____ Date Completed: __ / __ / __ Time Completed: __ : __ Chargeback Cost: \$ _____								