

PRINTING REQUEST FORM

Date _____

Customer/Account Number _____

Name _____

Purchase Order Number _____

IMESD / School _____

Project Title _____

Department _____

Date due _____

Number of Copies Needed _____

Front only Front & back As is

*Please send the first two copies of this form with your order. Retain the third copy for your records.
One copy will be returned with the completed print order.*

MATERIALS

Paper

- 8.5x11 8.5x14 11x17
 White Color (specify) _____

Carbonless

- 2 part 3 part 4 part 5 part
 Other _____

Cover Stock

- 8.5x11 8.5x14 11x17
 White Color (specify) _____

Original File

- Electronic copy via email
 Hard copy attached (clear black on white)

Index

- 8.5x11 8.5x14 11x17
 White Color (specify) _____

Full Color Copies

- Yes

SERVICES

Collating

Grouping

- or

Folding

- Half Letter Z fold
 Tape Closure (Specify) _____

Cutting

- 1/2 1/4
 Other _____

Laminating

- Yes

Stapling

- 1 Upper Left
 2 On Left Side
 Saddle Stitch
 Other _____

Binding

- Comb Coil Fastback

Numbering

Start # _____

Drilling

- 3 hole
 Other _____

Finish # _____

Padding

- 100 per pad x _____ Number pads
 50 per pad x _____ Number Pads

**First Time Ordering? Y - N (Please Circle)
If Yes Then How Did You Here about Us?**

ADDITIONAL INSTRUCTIONS

White and Yellow copy - Print Shop with order
 Pink copy - Customer