

**Operator Name:** \_\_\_\_\_ **Date Received:** \_\_\_\_\_ **PSP#** \_\_\_\_\_ **Requisition#** \_\_\_\_\_

<b>CUSTOMER INFORMATION: PLEASE PRINT</b>							<b>PS use ONLY</b>
<b>Print Description:</b> <small>Example:(Card / Brochure / Envelop / RE#...)</small>						<b>Date Due:</b>	<input type="checkbox"/> Print Shop
<b>Department:</b>							<input type="checkbox"/> Outsource
<b>Account #:</b>							<input type="checkbox"/> P-Card
<b>Alternate Account #:</b>							<b>(If funds are unavailable)</b>
<b>Contact for Billing:</b>							<b>Phone #:</b>
<b>Ordered By:</b>							<b>Phone #:</b>
<b>Deliver-Building &amp; Room #:</b>							

<b>ORDER INFORMATION</b>			
<b>Total Number of Prints:</b>		<b>Print On</b>	<b>Paper Type</b>
<input type="checkbox"/> <b>B/W:</b>	<input type="checkbox"/> 1 Side	<input type="checkbox"/> 2 Side	<input type="checkbox"/> Text/Thin <input type="checkbox"/> Cover/Thick
<input type="checkbox"/> <b>Color:</b>	<input type="checkbox"/> 1 Side	<input type="checkbox"/> 2 Side	

**ADDITIONAL INSTRUCTIONS:**

---



---



---



---

<b>FINISHING:</b>	Notes:	Notes:
<input type="checkbox"/> <b>Coil Bind:</b>		<input type="checkbox"/> <b>Cut Size:</b>
<input type="checkbox"/> <b>Covers:</b>		<input type="checkbox"/> <b>Fold:</b>
<input type="checkbox"/> <b>Inserts:</b>		<input type="checkbox"/> <b>Pad:</b>
<input type="checkbox"/> <b>3 Hole Drill:</b>		<input type="checkbox"/> <b>Staple:</b>
<input type="checkbox"/> <b>Shrink Wrap:</b>		<input type="checkbox"/> <b>Other:</b>

<b>STATIONARY:</b>	Qty	Qty	Qty	Qty	Qty	Qty	Notes:
<input type="checkbox"/> Business Card	250	500	750	1000	2500		
<input type="checkbox"/> Letterhead	500	1000	1500	2000	2500		
<input type="checkbox"/> Envelopes	500	1000	1500	2000	2500		
<input type="checkbox"/> Window Envelopes	500	1000	1500	2000	2500		

Title of Work:	Size	Qty	<b>POSTER/BANNER/SIGN:</b>	Add-On
				<input type="checkbox"/> Foam Board Mount <input type="checkbox"/> Grommet

<b>EVENT SIGNAGE:</b>	Directional Sign to Read	Yard Sign to Read	Location of Event
Start Date:			
Start Time:			
End Date:			
End Time:			

<b>DELIVERY INFORMATION:</b>		<b>TOTAL \$ AMOUNT:</b>	<b>FOR ACCOUNTING USE ONLY</b>
<b>Received By:</b>		\$	Initials: _____
<b>Name Printed:</b>			
<b>Delivered by:</b>	<b>Date:</b>		