



Date / Time Submitted	Date / Time Job Due
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Files Submitted by:  Hard Copy  Electronic Files

## Non Departmental Print Request Form

**ALL PRINT REQUESTS REQUIRE 50% DOWN PRIOR TO PROCESSING**

As the responsible person for this project, I agree to pay all amounts quoted on this document, even if it is for an organization. I understand that I will be the responsible party for all remedies for collection if I do not pick up or pay for the project in total.

Name (Print) \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<b>Responsible Party:</b>	<b>Organization:</b>
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<b>Phone Number:</b>
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<b>E-Mail Address:</b>	<b>Approved by:</b>
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<b>Job Description</b>
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<b># of Originals / Pages:</b>	<b># of Sets / Copies Needed:</b>	<b>Document Name:</b>
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<p style="text-align: center;"><b><u>Job Type:</u></b></p> <input type="checkbox"/> Black & White <input type="checkbox"/> Color <input type="checkbox"/> Finishing only <input type="checkbox"/> Scanning Only <input type="checkbox"/> Black & White <input type="checkbox"/> Color <input type="checkbox"/> Faxing: ___ In ___ Out	<p style="text-align: center;"><b><u>Requirements:</u></b></p> <input type="checkbox"/> Copy 1 Sided <input type="checkbox"/> Copy 2 Sided <input type="checkbox"/> Cardstock <input type="checkbox"/> Color Paper <input type="checkbox"/> Transparency <input type="checkbox"/> Reduce <input type="checkbox"/> Enlarge	<p style="text-align: center;"><b><u>Type of Stock:</u></b></p> <input type="checkbox"/> 8.5 x 11 <input type="checkbox"/> 8.5 x 14 <input type="checkbox"/> 11 x 17 <input type="checkbox"/> Yard Sign <input type="checkbox"/> Poster <input type="checkbox"/> Banner	<p style="text-align: center;"><b><u>Finishing</u></b></p> <input type="checkbox"/> 3 Hole Punch <input type="checkbox"/> Coil Bind <input type="checkbox"/> GBC Bind <input type="checkbox"/> Unibind  <p style="text-align: center;"><b><u>Stapling</u></b></p> <input type="checkbox"/> Top Left Corner <input type="checkbox"/> Saddle Stitch <input type="checkbox"/> 2 Top or Bottom Other _____  <p style="text-align: center;"><b><u>Folding</u></b></p> <input type="checkbox"/> Letter Fold <input type="checkbox"/> Half Fold
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Lamination:  ID Size  8.5 x 11  11 x17  Other

Wide Format Lamination: \_\_\_\_\_ Per Sq. Foot

Wide Format Printing Size: \_\_\_\_\_

How Many: \_\_\_\_\_

Special Instructions: \_\_\_\_\_

Total Charges: \$ \_\_\_\_\_ Down Payment: \$ \_\_\_\_\_ Total \$ \_\_\_\_\_

QC'D By: \_\_\_\_\_ Rec'd by Print Name: \_\_\_\_\_ Signature \_\_\_\_\_