

Printing Services Job Request
DUPLICATION

Order Number _____
Date Submitted _____
Date Needed _____

Requestor: _____ Ph. _____
Department: _____
Account Number: _____
Materials: _____

Machine Used:

M1 M2 L1 J1

Paper

No. Originals _____ #Copies/Sets _____

Single Single-to-Duplex Duplex-to-Duplex

Finishing/Fold:

Letter Half Double Parallel

Binding:

Staple Upper Left Upper/Bottom/Left Upper Left/ Landscape

Spiral Punch

Fast Back

Saddle Stitch

Lamination

Legal Letter Tab Trim Mil 3 5 7

Miscellaneous:

Shrink Wrapping Cutting Perforation Scoring

Office Use Only:

B.C. : _____

Rerun: _____

Printed By: _____

Order Pick-Up Date: _____ Assigned To: _____

QUOTE: _____ # Proofs: _____

Picked Up By: _____ Date: _____
(Signature)