### Copy Center Job Request Form

**Today's Date / Time:** ____________________________  **Date / Time Required:** ____________________________

**Requested By:** ____________________________  **Telephone Number:** ____________________________

**Fund Code:** ____________________________  **Project Code:** ____________________________

**Customer Pick up or Faculty Delivery (circle one):** ____________________________  **Delivery Location:** ____________________________

### Job Description

**Job or File Name:** ____________________________  **Total # of Jobs for this order:** _______ of _______

**Number of Originals:** _______  **Number of Copies / Sets:** _______  **B&W:** _______  **Color:** _______

#### STANDARD COPIES

- 8.5 x 11
- 8.5 x 14
- 11 x 17
- OVERSIZE: _______

- Copy One-Sided
- Copy Two-Sided
- Copy As Is
- Reduce _______  Enlarge _______

#### PAPER SELECTIONS

- 20# White (BW copies)
- 20# 3-Hole White (BW copies)
- 20# Color:
- CARDSTOCK:
- 24# White (COLOR copies)
- 60# Color:
- Customer Supplied:
- NCR: 3-part or 2-part (circle one)

#### FINISHING and SPECIALTY OPTIONS

- Cutting:
  - Finished Size: ____________
  - To Bleed?  Y  N

- Comb / GBC Bind
  - Covers: ____________
  - Rebind Original:  Y  N

- Coil Bind
  - Covers: ____________
  - Rebind Original:  Y  N

- Drilling:  if other than standard 3HD, please provide a sample

- By Hand:  (circle your choices)
  - Collate:  per piece  or  package
  - Staple
  - Other: ____________

- Lamination (write in size)

- Tabs:  customer to provide tab information, order of tabs, etc. at time of order

- Folding:

- Wide Format / Poster
  - Size: ____________

- Padding:  fan-apart  or
  - # of finished pads ____________
  - # of sheets per pad ____________

**Special Request / Services:** ____________________________

### Copy Center Use Only

**First Meter ID:** ____________________________  **Second Meter ID:** ____________________________

**Meter Start:** ____________________________  **Meter End:** ____________________________

**Total Billable Impressions:**  B/W ____________________________  **COLOR 8.5x11 or 14:** ____________________________  **11x17:** ____________________________

**Total Billable Paper and Type** (separated by TYPE)

**Additional Services:** ____________________________

**Operator Initials:** ____________________________  **Date/Time Completed:** ____________________________

**QC'd by:** ____________________________  **On Time:  Y  or  N**