

Requestor:		Ext.:	
Department/Division:		ORG #:	
		Deliver to:	

A. Service Requested - Please allow 1-2 working days for basic jobs.

Description of Order:

Date of Order:		Date Needed:	
# of original pages:		If originals are double-sided, please check here.	<input type="checkbox"/>
Print: <input type="checkbox"/> 1 Side <input type="checkbox"/> 2 Sides		# of copies of each original page:	
Staple <input type="checkbox"/>		<i>Please attach an example of how the finished material should be arranged. Do not staple original copies.</i>	
3-Hole Punch <input type="checkbox"/>			

B. Additional Services - Please allow extra time to complete these tasks.

Fold <input type="checkbox"/> Single sheet only (no staples)	Bind <input type="checkbox"/> glue Bind <input type="checkbox"/> spiral - <i>Requestor must supply binding materials.</i>	Lamination <input type="checkbox"/>
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C. Select Paper Color

White <input type="checkbox"/>	Blue <input type="checkbox"/>	Yellow <input type="checkbox"/>	Pink <input type="checkbox"/>	Green <input type="checkbox"/>	Other <input type="checkbox"/> <i>Requestor must supply own paper.</i>
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D. Color Copying

Color
(.49 cents per copy)

Approving ORG Manager (Required for color ink copies.)

E. Comments and Instructions

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NOTICE
WARNING CONCERNING COPYRIGHT RESTRICTIONS

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This institution reserves the right to refuse a copying order if, in its judgment, fulfillment of the order would involve violation of copyright law.

APPROVING DEAN/DIRECTOR/DESIGNEE
(Required if copyrighted material)

COPY CENTER USE ONLY

Date In:		Date Out:		Initials:		Color Copies Cost:	
Drop Off <input type="checkbox"/>	Walk-up Service <input type="checkbox"/>	Intercampus Mail <input type="checkbox"/>	Emailed <input type="checkbox"/>	Lamination <input type="checkbox"/>	Binding <input type="checkbox"/>		
Copier Used: B9100 <input type="checkbox"/>	Copier Used: C9070 <input type="checkbox"/>	Copier Used: C8035 <input type="checkbox"/>					