

CUSTOMER	Department Name: _____		
	Title of Project: _____		
	Department Contact: _____		Phone #: _____
	Email Address _____		Fax# _____
	_____ AUTHORIZED SIGNATURE	_____ NAME (PLEASE PRINT)	_____ DATE

See reverse side for paper option codes.

**Black & White Copies** (Up to 4 paper choices)

Number of copies: \_\_\_\_\_

Paper Option: \_\_\_\_\_

CODE                      COLOR                      NUMBER OF ORIGINALS

Paper Option: \_\_\_\_\_

CODE                      COLOR                      NUMBER OF ORIGINALS

Paper Option: \_\_\_\_\_

CODE                      COLOR                      NUMBER OF ORIGINALS

Paper Option: \_\_\_\_\_

CODE                      COLOR                      NUMBER OF ORIGINALS

Customer Provided Paper      Description \_\_\_\_\_

8 1/2 X 11      8 1/2 X 14      11 X 17

**Color Copies**

BLANK      ONE SIDED      TWO SIDED      ONE AND TWO SIDED\*\*

B/W      COLOR      PAGE #

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_







\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Electronic File

\*\* When combining one and two sided work, a sample or pagination explanation (or dummy) must be attached.

<b>BINDERY</b>	Collate 	One staple upper left 	<b>FOLD</b>	3-letter
	Do not collate 	Two staples at left 		Half
	Drill - 3 holes at left 	19-hole GBC Binding *		Copy faces in
	Thermal tape * 	Acetate covers & backs *		Copy faces out
	Shrink Wrap. How many per package _____			

**CUT** from 8 1/2" x 11" to \_\_\_\_\_ x \_\_\_\_\_ Out = Total Sheets \_\_\_\_\_

\* Please allow additional time.

RESALE	Complete if books are being sold at Bookstore.				Main	Health Science	Law	UCDMC
	Course #: _____		Course Name: _____					
	Desk Copies: _____		Instructor: _____					
	Bookstore Use Only		Buyer: _____			BTX: _____		
Selling Price: \$ _____		Copyright Fee \$ _____			Total Price: \$ _____			

<b>BULK MAIL</b>	Bulk Mail Center (This form cannot be used for off-campus mailings)				
	Insert	Label	Count	Sort	Staple
	Name of List: _____				
	Special Instructions: _____				

DELIVERY	<b>DELIVER TO:</b> _____	<b>VIA:</b> _____
	<b>Name:</b> _____	Call/Pickup
	<b>Department:</b> _____	QC Delivery
	<b>Building:</b> _____	
	<b>Room:</b> _____ <b>Phone:</b> _____	

Client acknowledges receipt of packages and/or boxes.

**X** \_\_\_\_\_ Time: \_\_\_\_\_

<b>Special Instructions</b>			
Copyright Permission/Fair Use Form Attached Repro Graphics to assist with copyright			
Note: Publishers require 6-8 weeks for processing. Copyright permission must be obtained each printing.			
<b>Operator Codes/Comments</b>			
Opr.	Mach.	Code.	Time
Inv.#.		\$	
<b>For Office Use Only</b>			
Date: _____			
No. Boxes: _____			
No. Pkgs: _____			
No. Originals: _____			
Initials _____			

Recycled Paper Option Codes - 8 1/2 x 14 and 11 x 17 available by special order. Please allow additional time.

20# Bond	60# Offset	90# Index
5206 - White 5258 - Blue 5259 - Canary 5260 - Pink 5261 - Green 5262 - Buff 5263 - Ivory 5265 - Salmon 5266 - Lilac	5256 - White 5001 - Lunar Blue 5002 - Re-Entry Red 5004 - Gamma Green 5006 - Neptune Blue 5007 - Mars Magenta 5008 - Galaxy Gold 5009 - Orbit Orange 5063 - Sunburst Yellow 5067 - Stardust White 5055 - Astroparche White 5050 - Astroparche Blue 5051 - Astroparche Natural 5068 - Evergreen Cottonwood	5819 - White 5820 - Blue 5821 - Canary 5822 - Gray 5823 - Green 5824 - Ivory 5825 - Orchid
Paper for Color Copies* (recommended)		
	*5026 - Xpression C2S 80# Text White *5029 - Xpression C2S 80# Cvr White *5032 - Xpression C1S 8pt White *5035 - Xpression Plus 24# White *5036 - Xpression Plus 28# White *5039 - Xpression Plus 60# White	
Transparencies		
	5875 - Black & White Transparencies 5895 - Color Transparencies	