

Copy Request Page count of originals _____ No. of copies needed from original _____ DATE needed _____

Questions? Call ext.133 please

Please check instructions that apply:

Date _____ School _____

____ collate only

____ Print 1 side only

____ Print 2 sided

I certify this request is in compliance with Dist. 55 BP-EGAA and U.S. copyright laws.

____ collate and staple left corner

____ Print *exactly* as original

Teacher Signature _____

Administrator signature _____

Budget Number _____

*Booklet Form-folded & stapled, (60 pg limit)
____ 8.5 x 11" ____ 5.5 x 8.5"
*Spiral bind _____ (allow extra time)
*Pads _____ *Cut _____ *Drill Holes _____
**allow extra time for above options*

Paper Choice:

____ Reg. wt. ____ Bright

____ Cover wt.

____ *Carbonless, 2 3 4 5 6
(circle # of parts, allow 2-3 days extra time)

Other Instructions:

Single Sheet Paper Size:

____ 8.5 x 11" ____ 8.5x14" ____ 11x17"

Color:

____ white ____ color

Color Preference?

Print Shop Use Only:

_____.007/image _____
_____.8.5x11 white .005 / _____.007 color w _____ c _____
_____.8.5x14 white .008 / _____.01 color w _____ c _____
_____.11 x17 white .01 / _____.014 color w _____ c _____
_____. Spirals @ .50 each \$ _____

_____. Brights & 70 wt. 8.5 x11" @ .013 _____
_____. Brights & 70 wt. 11x17" @ .035 _____
_____. Tag/Cover wt. 8.5 x11 @ .04 _____
_____. Tag/Cover wt 11 x17 @ .08 _____
_____. Carbonless @ .03 each sheet _____

Date Request was Received _____

Total Charge \$ _____