COPY CENTER REQUEST FORM



Today's Date / Tir	ne:		ate / Time Require	ed
			Telephone Number:	
Department Organization #:			Delivery Info:	
☐ Call When Ready ☐ Hold for Pick up			roof Yes No	_
JOB DESCRIPTIO	N:			
Number of Pages	Per Original:	N	umber of Copies /	Sets:
Standard Copies:	B&W:	Color:	Mixed, B&W	and Color:
□ 8.5 x 11 □ 8.5 x14 □ 11 x 17 □ 12 x 18 □ Oversize Paper: □ White 20lb □ White cards	Copy One to One Copy One to Two Copy Two to Two Copy Two to One Mixed Originals, Pastel 201 Stock 110lb Bright 24/	o Sided	ollated, Stacks ce / Enlarge	☐ Two Staples☐ Landscape Staple
☐ Laser White	e 28lb □ Pastel car 30lb □ Bright car	dstock 90lb (list colo	r):	☐ Avery Labels
	☐ Tape Bind ☐ Comb Bind ☐ Coil Bind ☐ Perforation ☐ Clear Back	☐ Letter Fold ☐ Z Fold ☐ Half Fold ☐ Double Fold ☐ Custom Fold ☐ Custom Fold ☐ Stan ☐ Custom Tabs ☐ Scan	☐ Card ☐ 8.5 x 11 ☐ 8.5 x 14 ☐ 11 x 17 ☐ Oversize (up t WCC Busines ☐ 250 card ☐ 500 card	□ Padding: #of pads o 24"wide) sheets per pad
Date / Time Received:		COPY CENTER USE		Waste:
Meter Start:				
Total Billable / Item:			Price:	
			Total Price:	
Operator Initials: Date/Time Completed:		QC'd by:	On Time: Y or N	