

Printing Order Form

Fund _____ Department _____ Program _____ Grant _____

Department Name _____ Date of Submission _____

Contact Person _____ E-mail _____

E-mail address for billing (If other than above) _____

Phone _____ Fax _____ Box _____ Requested Delivery Date _____ Must

Deliver to Building _____ Rm. _____ Attention: _____

Has content been approved by University Communications? Yes No

New Job Reprint (Sample Required) Revision (Sample required with changes indicated) Last Job _____

Design/Layout Artwork Only Providing Print Ready Art

Job Description _____

Estimate Quantities _____ **Final Quantity** _____

Side One Ink Black PMS PMS _____ 4C Varnish _____

Side Two Ink Black PMS PMS _____ 4C Varnish _____

Trim Size _____ **Finished Size** _____ Bleed _____ Sides

Paper Stock Cover _____ weight Text _____ weight Description _____

Cover _____ weight Text _____ weight Description _____

BOOKLET	Page Size _____	Number of Pages _____	<input type="checkbox"/> Self Cover	<input type="checkbox"/> Plus Cover
Inside Booklet				
Ink	Side 1 <input type="checkbox"/> Black <input type="checkbox"/> PMS _____	<input type="checkbox"/> PMS _____	<input type="checkbox"/> 4C	<input type="checkbox"/> Varnish <input type="checkbox"/> _____
Ink	Side 2 <input type="checkbox"/> Black <input type="checkbox"/> PMS _____	<input type="checkbox"/> PMS _____	<input type="checkbox"/> 4C	<input type="checkbox"/> Varnish <input type="checkbox"/> _____
Cover				
Ink	Side 1 <input type="checkbox"/> Black <input type="checkbox"/> PMS _____	<input type="checkbox"/> PMS _____	<input type="checkbox"/> 4C	<input type="checkbox"/> Varnish <input type="checkbox"/> _____
Ink	Side 2 <input type="checkbox"/> Black <input type="checkbox"/> PMS _____	<input type="checkbox"/> PMS _____	<input type="checkbox"/> 4C	<input type="checkbox"/> Varnish <input type="checkbox"/> _____

BINDERY Fold Instructions _____ Final Folded Size _____

Score _____ Drill _____ Perforate _____ Number _____ - _____

Saddlestitch Perfect Bind Comb Bind Coil Bind Staple

Pad _____ Sheets Per Pad Shrink Wrap Laminate

Mail Prep _____

Other _____

Special Instructions/Comments _____