DIGITAL PR	INT RE	QUI	SITION - AL	L IN	VFORM.	ATIO	N	MUST B	E FIL	LED OUT	
LAST NAME INITIAL	PRINTING REQUISITION					Account Number REQUIRED					
NAME		D	DEPT.	PHON	IE NUMBER			DATE SUBMITT	ED	DATE ORDER NEEDED*	
TITLE OR DESCRIPTION OF W	ORK		PRINTING IN	STR			U	XAMS MUST PI P BY FACULTY	CKED OR STAF	FF ONLY!	
NUMBER OF ORIGINALS SUBMITTED REQUIRED			COPIES OF EAC				IS TYPESETTING REQUIRED?  NO YES Email to send proof:				
— PAPER SPECIFICATIONSBINDERY INSTRUCTIONS									NS -		
ONE SIDE		OVERHEAD TRANSPARENCY  NCR SETS 2-PART 4-PART 3-PART 5-PART  COVER OR CARD STOCK  Color* *Check with Printing to see what colors are available.		BINDING  COLLATE  STAPLE  BLACK TAPE  FOLD  PUNCHING  CUTTING  OTHER  COLOR  COPIES			Nu (50 Nu Pa	ADDING umber of eets Per Pad D Min.)  mber of ds  ue Edge Top   Left	DTE:		
						A c	Any rush job needs to be confirmed with the Print			SHIPPING INFO:	
FILES MUST BE SUPP SPECIAL INSTRUCTION		DF. (	Please confirm files are )Ficorrect before sending )Fi	LE N	AME:					Interoffice  Location  Mailroom  Email  DIGITAL FORM 11/21	