



CANYONS School District

Copy Center Use Only

Job # _____
 Completed _____ by _____
 Cost: Each _____ Total _____
 Delivered _____ by _____

COPY CENTER ORDER FORM

For Assistance, Bids or Complex Orders, please call 801-826-5516. Fax: 801-826-5379 - Email: susan.chase@canyonsdistrict.org

CUSTOMER INFORMATION

School or Department: _____

Ordered/Authorized by: _____

Admin. Signature: _____

Fund	Location	Program	Function	Object

Telephone: _____

PRINTING INSTRUCTIONS

1 Name or Description of Job: _____

2 Number of Copies Needed:

3 Type of Paper:

- White
- Pastel Text
- Parchment
- Bright Text
- Bright Cardstock
- Pastel Cardstock
- Photo White Text
- Photo White Cardstock
- 2 Part NCR 3 Part NCR

4 Paper Size:

- 8 1/2" x 11"
- 8 1/2" x 14" (Legal)
- 11" x 17"
- 13" x 19"

5 Paper Colors:

(refer to online color chart)

6 Copy Request:

- Black/White
- Color

7 Print on:

- One Side
- Both Sides
- Per Sample Provided

FINISHING INSTRUCTIONS

8 Check any that apply:

- | | | | | |
|----------------------------------|------------------------------------|---|-------------------------------|--|
| Sort: | Staple: | Fold: | Bind: | Misc: |
| <input type="checkbox"/> Collate | <input type="checkbox"/> Corner | <input type="checkbox"/> Half-Fold | <input type="checkbox"/> Comb | <input type="checkbox"/> 3 Hole Punch |
| OR | <input type="checkbox"/> 2 on Side | (top to bottom) | <input type="checkbox"/> Coil | <input type="checkbox"/> Pads (NCR) |
| <input type="checkbox"/> Stack | <input type="checkbox"/> Booklet | <input type="checkbox"/> Letter Fold (Z-fold) | | <input type="checkbox"/> Fan apart (NCR) |

ADDITIONAL INSTRUCTIONS

9 _____

DATE NEEDED/DELIVERY INSTRUCTIONS

Date Received by Copy Center: _____ Date Order is Due: _____

- Call When Ready
- Will Pick Up on Date Indicated
- Send in Inter-District Mail