



JOB NUMBER

COPY REQUEST

**20# Bond Paper
8 1/2 x 11 • Black Ink ONLY!**

Work Requests are printed on a first-come, first-served basis, after the request has been date/time stamped in the Graphics department.

E-mail form and files to: copyrequest@gwc.cccd.edu
We accept PDF files only

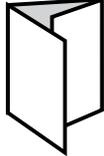
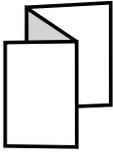
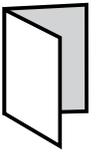
FIRST NAME	LAST NAME	DIVISION/DEPARTMENT	E-MAIL @gwc.cccd.edu	PHONE NUMBER
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COPY CARD NUMBER	TYPE OF WORK <input type="checkbox"/> Test/Quiz* <input type="checkbox"/> Other	TITLE OF WORK
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NUMBER OF ORIGINALS Each side of a printed page is counted as one original. Originals need to be all one-sided or all two-sided, no combinations please.	NUMBER OF FINISHED SETS Finished sets equals number of pieces <u>after</u> collating/stapling or <u>cutting</u> .	PRINT <input type="checkbox"/> 1-sided <input type="checkbox"/> 2-sided
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PAPER COLOR

White Ivory Goldenrod Green
 Canary Pink Blue

BINDERY SERVICES <input type="checkbox"/> Collate & Staple <input type="checkbox"/> 3-Hole Punch <input type="checkbox"/> Cut <input type="checkbox"/> Stack by Page <input type="checkbox"/> Collate Only <input type="checkbox"/> Fold	FOLDING <input type="checkbox"/> Letter Fold  <input type="checkbox"/> Z-Fold  <input type="checkbox"/> 1/2-Fold 
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SPECIAL INSTRUCTIONS

*Special security is provided for tests and quizzes.

OPERATOR INITIAL: _____ DATE: _____ UP _____

TOTAL COST: _____