

## **Copy Center Work Request**

Phone: (425) 456-4036 / \*\* Indicates Extra Charge

REQUESTOR INFORMATION:												
Budget Code: (Re	quired)			Authorized Signat	Authorized Signature: (Required)							
Your Name:	3:						Due Date: (Required	(No ASAP)				
Project Title:	Class Extensio					Cell Phone:						
COPY INFORMATION:												
# of Copies:		es: 	Print One Sided:			Print Back to Back:						
PAPER CHOICE:												
8.5 x 11 Color:						(Bond Only) 11	x 17 Color:	(Bond Only)				
	I	1					1	1				
Bond #20 🗖	Index #110 <b>C</b>	Index #110 ☐ Cover a		#65 D Vellum #70		Brites #20/60 □	Parchment $\square$	Print Color**				
2-Part (W/Y)	3-Part (W/Y/P) □ 4-Pa			/P/G) 🗖	5-Part (W	//GR/Y/P/G) 🗖	R/Y/P/G) W- White, Y-Yellow, P-Pink, G-Goldenroc					
FINISHING REQU	EST: Check appro	opriate boxes		SPECIAL INSTRU	SPECIAL INSTRUCTIONS:							
Staple:												
Fold:	Glue: 🗆	Cut:	Collate:									
2 - Hole Punch:		3 – Hole Pu	ınch:									
Fast Back Binding ** Approval Required												

## All job(s) MUST be paper clipped to the work request form.

****** Copy Center Use Only *****										
Date Mailed:				Paper	QTY/Reg Copy	QTY/X Copy	QTY/X Copy			
# of Copies	1-Sided	2-Sided	Kodak	Bond 8.5 x 11						
# of Copies	1-Sided	2-Sided	Kodak	Bond 8.5 x 14						
# of Copies	1-Sided	2-Sided	Kodak	Bond 11 x 17						
				Bond Punched						
Standard Finishing Cha	arges			Brites						
Collate	Glue			Vellum						
Collate/Staple	Cut			Cover						
Collate/Staple/Fold	Punch			Index						
Master	Fold			NCR 2-Part						
				NCR 3-Part						
Other Charges				NCR 4-Part						
Description			NCR 5-Part							
				Transparency						
				Parchment						
				Color	-					