

NORTHVIEW COPY CENTER ORDER FORM

HOURS: 7:15 am - 2:15 pm M - Th
361-3474 EXT. 28118
copycenter@nvps.net

DATE SENT _____ DATE NEEDED _____
(Please allow 48 hours)

NAME _____

BUILDING _____ BILL TO DEPT: _____

HOW MANY COPIES?

STANDARD	_____	X	_____	ORIGINALS	=	_____
CARDSTOCK	_____	X	_____	ORIGINALS	=	_____
LARGE	_____	X	_____	ORIGINALS	=	_____

STANDARD:		CARDSTOCK:		LARGE:
White	Pink	White	Yellow	WHITE ONLY
Blue	Gldnrod	Blue	Pink	11 x 17
Green	Orchid	Green	Goldenrod	8.5 x 14
Yellow	Any color			

double sided OR single sided	collated (1,2,3) OR stacked (1,1,1)
single staple	double staple no staple landscape staple
3-hole punch	multi-up CUT FOLD - half/tri
BOOKLET	COVER COLOR (opt.): front _____ back _____
(with fold)	CARDSTOCK? _____ yes _____ no

Special Instructions:

Signature _____

I verify that this request for printing complies with the copyrights adopted by the Northview Board of Education on June 9, 1992.

PLEASE SEND 2 COMPLETED FORMS OR 1 FORM AND 1 SLIP WITH NAME AND BUILDING

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