

## Print Services

**[www.umass.edu/campus\\_services/print](http://www.umass.edu/campus_services/print)**

Please complete and send with sample of the job. Upon receipt, job number will be assigned. Contact listed will be notified of the job number and estimated completion date. Orders not accompanied by properly completed form and sample are subject to delay.

**For inquiries, please refer to job number** \_\_\_\_\_ ☐

**DELIVER COMPLETED JOB TO:**

Name: \_\_\_\_\_

Building:

Room No. \_\_\_\_\_

### ☐ Customer Pick Up

DATE OF ORDER	SIGNATURE OF DEPARTMENT HEAD OR AUTHORIZED PERSON			SPEED TYPE	FUND CODE
DATE DESIRED	NAME OF DEPARTMENT			CONTACT NAME	
DATE RECEIVED	NAME OR DESCRIPTION OF PRINTED MATTER			CONTACT PHONE NO.	ALT. PHONE NO.
<i>Will this job need to be reviewed for mailing compliance?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No					
NO. OF COPIES	FINISHED SIZE  _____ in. X _____ in.	COLOR OF STOCK	KIND OF STOCK (Bond, Offset, Vellum, Cover)		COLOR OF INK
TOTAL NO. OF FINISHED PIECES WANTED	SIZE OF STOCK  _____ in. X _____ in.	NO. OF ORIGINALS	NO. UP / ON	PRESS RUN	NO. OF IMPRESSION
<input type="checkbox"/> 1 SIDED <input type="checkbox"/> 2 SIDED (Head to head) <input type="checkbox"/> 2 SIDED (Head to toe) <input type="checkbox"/> AS IS	<input type="checkbox"/> DO NOT COLLATE <input type="checkbox"/> COLLATE  <input type="checkbox"/> NUMBERING Start # at: _____	<input type="checkbox"/> 1 HOLE PUNCH <input type="checkbox"/> 2 HOLE PUNCH <input type="checkbox"/> 3 HOLE PUNCH Provide sample of hole location	<input type="checkbox"/> DO NOT STAPLE <input type="checkbox"/> STAPLE UPPER LEFT <input type="checkbox"/> STAPLE TWO LEFT <input type="checkbox"/> SADDLESTITCH BOOKLET	<input type="checkbox"/> SCORE <input type="checkbox"/> PERFORATE Provide sample or measurements	<input type="checkbox"/> DO NOT FOLD <input type="checkbox"/> ONE FOLD <input type="checkbox"/> 2 FOLD - LETTER <input type="checkbox"/> 2 FOLD - Z <input type="checkbox"/> RIGHT ANGLE FOLD  <input type="checkbox"/> 1   or <input type="checkbox"/> 2 <input type="checkbox"/> OTHER <input type="checkbox"/> FOLD PRINT IN <input type="checkbox"/> FOLD PRINT OUT Please provide sample
<b>BINDING</b> Please specify which side is to be bound					
<input type="checkbox"/> TAPE BIND - BLACK <input type="checkbox"/> PERFECT BIND - WHITE GLOSSY <input type="checkbox"/> TAPE BIND - WHITE <input type="checkbox"/> PERFECT BIND - BLACK VINYL  <input type="checkbox"/> PERFECT BIND - 80 # COVER		<input type="checkbox"/> COMB BINDING - BLACK <input type="checkbox"/> COMB BINDING - WHITE <input type="checkbox"/> COMB BINDING - MAROON <input type="checkbox"/> ACETATE (Front, Back, Both)		<input type="checkbox"/> PADDING  SHEETS PER PAD:  NO. OF PADS:	
Stock & color of cover: _____					

ORIGINALS: Camera-ready copy should be submitted neatly typed on white stock, Regular Bond (not Ragbond), using one side of the sheet only. Print Services does not accept responsibility for copies duplicated from poorly typed originals, nor will it accept responsibility for typographical errors. If you have any questions pertaining to the preparation of camera-ready copy, paper stock, etc., please phone Print Services. (7-9500).

- ☐ USE ATTACHED AS ORIGINAL (Unnumbered originals should be numbered with nonreproducing blue pencil)
- ☐ ORIGINAL PROVIDED ON DISK - HARD COPY MUST BE ATTACHED  
File Name & Extension \_\_\_\_\_ ☐ PC ☐ MAC
- ☐ ORIGINALS SUBMITTED ELECTRONICALLY - HARD COPY MUST BE ATTACHED  
File Name \_\_\_\_\_ ☐ PS ☐ PDF ☐ TIF
- ☐ PLEASE RECALL FILE - SAMPLE ATTACHED - NO CHANGES
- ☐ PLEASE RECALL FILE - SAMPLE ATTACHED - CHANGES NOTED
- ☐ PLEASE TYPESET NEW ORIGINAL

*All jobs newly typeset and those submitted electronically must be proofed before final printing.*

Name of person who will proofread \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

*I have reviewed the attached proof and authorize printing to be completed:*

Signature \_\_\_\_\_ Date \_\_\_\_\_

OTHER INSTRUCTIONS:

Signature \_\_\_\_\_

Date Picked Up\_\_\_\_\_

	DATE	OPER.	CHARGES
TYPESETTING	_____	_____	_____
MASTERS	_____	_____	_____
DPM	_____	_____	_____
METAL PLATE(S)	_____	_____	_____
INK / SET UP	_____	_____	_____
PRINTING	_____	_____	_____
PRINTING	_____	_____	_____
PRINTING	_____	_____	_____
PAPER	_____	_____	_____
PAPER	_____	_____	_____
COLLATING	_____	_____	_____
FOLDING	_____	_____	_____
STAPLING	_____	_____	_____
PADDING	_____	_____	_____
PERFORATING	_____	_____	_____
SCORING	_____	_____	_____
PUNCHING	_____	_____	_____
SUPPLIES	_____	_____	_____
CUTTING	_____	_____	_____
TAPE BINDING	_____	_____	_____
COMB BINDING	_____	_____	_____
PERFECT BIND	_____	_____	_____
NUMBERING	_____	_____	_____
HAND WORK	_____	_____	_____
SHIPPED	_____	_____	_____
	_____	_____	_____
SUBTOTAL	_____	_____	_____
TAX	_____	_____	_____
TOTAL	_____	_____	_____