

PRINTING ORDER / REQUISITION

Job Ticket Number _____ Requisition Number _____
 Date _____ Department _____
 Delivery Date: _____ Contact Person _____
 Quote/estimate number _____ Telephone _____ FAX _____
 PREVIOUS JOB NO. _____ Delivery Address _____
 Quantity _____ Job Description/Title _____
 Special Instructions _____

Number of pages/panels _____ Reprint Changes New Job Finish (final) Size _____
 Flat (unfolded) size _____ Page Size _____ Kind of Cover Separate Self-cover
 Bleeds Yes No To Run: 1 side 2 sides Head-Head Head-Foot

DESIGN / LAYOUT

Composition/Mechanicals

File provided on Mac disk IBM/PC Hard copy provided
 _____ Typesetting needed
 Name of file _____
 File sent to: _____
 please send pdf file; e-mail address: _____
(Created from final proof)

Printing Type

Offset press
 Digital: Color _____
 B/W _____
 Letterpress Only

Proofing

Kinds of proofs requested: Electronic _____ Page Wide format Press
Send to email address

PAPER / INK

	Ink Colors	
Weight	Description/Color	
Text _____	1st side _____	2nd side _____
_____	_____	_____
Cover _____	1st side _____	2nd side _____

BINDERY

Finishing

Emboss Unibind
 Fold _____ Collate Perfect Bind
 Score Perforate Saddle Stitch Comb bind Spiral bind
 Die Cut Custom Die Required Side Stitch & Tape Color _____
 Number—starting # _____ Staple/ULC Carbonless Pad
 Shrinkwrapping – wrap in _____ Tabbing _____ Pad—# per pad _____

Inserting

No. of items _____
 Quantity _____
 Drill—
 No. of holes _____

MAILING

Addressing

Quantity _____
 Labels provided Generate labels (inkjet labeling)
 Disc provided File e-mailed to printmail@ksu.edu

Mailing

Quantity _____ A&K, (O), (F), (A)
 1st Class Standard Other _____
 Non-Profit

Approval:

_____ Department or Unit Head