GRAPHICS USE ONLY

Job No. _____



Date Received	Date Due		QUEST FORM
GRAY AREAS MUST BE COMPLET		ONE ITEM PER REQUEST FORM ATTACH A CURRENT SAMPLE	
Customer Informatio	n 🔻	※ Billing Information ▼	
▲ Name of Person Filling Out	t Request Form	-	()
	<u>'</u>	▲ Signature of Authorized Admir	nistrator
▲ Telephone No. & Ext.			
▲ Fax No.		▲ Division/Department, Program	or School
Printing Services I	Requested ▼		
Title of Job ►			
Number of Copies ►		Completion Date ►	
Number of Pages		Size	
Printed 1 Side Pri	inted 2 Sides Black Ink D	Colored Ink(s):	
Paper		NCR (Carbonless Form	s)
White	Color:	2-Part (WHITE, YELLOW)	5-Part (White, Green, Yellow, Pink, Go
As Per Sample	Letterhead (Certificate Bond)	3-Part (White, Yellow, Pink)	Other (Specify):
Glossy	Card Stock	4-Part (White, Yellow, Pink, Gold)	
Other (Specify):		Envelopes	
Bindery Services			O Regular #10 Window
	Collate Staple Perforate 3-Hole Punch	Other (Specify):	
Other (Specify):	2 Tole Fundi		
Stock Items		Manila Envelopes	
BOCES Note Pads	Interoffice Memos		^{/2} x 9 ^{1/2}
4 ^{1/4} x 5 ^{1/2} (50 SHEETS PER PAD)	8 ^{1/2} x 11	☐ 10 x 13 ☐ 12 ☐ Other (Specify):	X 15"2
BOCES Note Pads 51/2 x 81/2 (50 Sheets Per Pad)	Interoffice Manila Envelopes 10 x 13 (250 PER Box)	Special Notes	
Blank Scratch Pads 4 ^{1/4} x 5 ^{1/2} (100 Sheets Per Pad)	Interoffice #10 Envelopes (500 Per Box)	Special Roles	
Photocopy Paper (Specify Size):		
Dansan all and the same			
Personalized Items	Nome D- 1- 41/4 - 51/2		
Business Cards (500 MINIMUM)	Name Pads 4 ^{1/4} x 5 ^{1/2} (20 Pad Minimum, 100 Sheets Per Pad)	Delivery Instructions	V
Name Pads 5 ^{1/2} x 8 ^{1/2} (20 Pad Minimum, 100 Sheets Pe	er Pad)	Name ►	
	TOTAL MATERIA CAMBIE	rvalile 🚩	
1 CD/	IIS FORM, <u>WITH SAMPLE</u> APHICS DEPARTMENT	Location ►	
✓ interoffice mail to: GR/ ✓ or email it to: gra	aphics@nasboces.org		

If you have any questions, call: 396-2030