

COPYING REQUEST FORM

Date of Request: _____ Date Due: _____

Copies to be Picked Up By (name): _____

Requestor (name): _____

Requestor Contact Number: _____

Ministry: Teach Outreach Worship Evangelize Relationships Charge Code: _____

Program/Group Requesting: _____

Purpose: _____

Number of Copies: _____ Single-sided Two-sided Booklet

Paper Size: Letter Legal Tabloid (11x17) Postcard Business Card

Available Paper Colors: White Cherry Cream Gold Gray Pink
 Peach Orchid Purple Blue Yellow

Finishing: Corner Staple Double-Side Staple Booklet
 Three-Hole Punch Two-Hole punch

Additional Information (specify) _____

For Office Use: Date Rec'd _____ Date Completed _____ Completed by _____

Requestor Notification: Date Notified: _____ Method notified: Email _____
Fax _____
Phone _____