

# PITTSFORD CENTRAL SCHOOLS

## PRINT CENTER REQUEST

Request Date: \_\_\_\_\_ Date Needed: \_\_\_\_\_

JOB: (Name) \_\_\_\_\_

Copy Prepared and Proofread By: \_\_\_\_\_  
(name)

School \_\_\_\_\_ Telephone No.: \_\_\_\_\_

DELIVER TO: \_\_\_\_\_ E-mail: \_\_\_\_\_  
\_\_\_\_\_

Quantity: _____	# of Pages _____	Staple: upper left side stitch
One-sided	Two-sided	saddle stitch
		Comb bind
Uncollated	Collated	Fold: single letter special
Black & White (Min.1000)	Full Color (Min. 250)	
Paper/Color/ Type _____		Size of Paper: 8 1/2 x 11
Carbonless forms (circle one) 2 3 or 4 Part		8 1/2 x 14
		11 x 17
#10 envelopes (circle one) plain window		12x 18

### SPECIAL INSTRUCTIONS:

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\_\_\_\_\_  
Principal's Signature or Appropriate Administrator's Signature

\_\_\_\_\_  
Date

**\*\* This form must accompany all requests and be signed and dated by the building principal or appropriate administrator.**

**\*\*\* Requests must be received at least 2 days in advance.**  
**For major printing tasks, allow 2 weeks.**

Questions regarding a print request, please call or E-mail:  
ED PRETKO (267-1086) Fax: 385-6328 ed\_pretko@pittsford.monroe.edu

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