

LISD COPY CENTER JOB ORDER FORM

Revised 2/07

NAME _____

CAMPUS/DEPT: _____

DATE SUBMITTED _____

DATE REQUIRED _____

OF ORIGINALS _____

OF COPIES _____

Campuses Check One:

Departments Check One:

_____ For Classroom (11)

_____ Admin Services 41-729

_____ Library 12-999

_____ For Teacher Training (13)

_____ Athletics 36-001

_____ Nurses 33-999

_____ For Principals (23)

_____ Business Office 41-726

_____ Plant & Maint 51-937

_____ For Counselor (31)

_____ C&I Assessment 31-871

_____ Public Relations 41-720

_____ For Nurse (33)

_____ C&I Curriculum 21-871

_____ School Board 41-702

_____ For Extracurricular (36)

_____ C&I Teacher Training 13-871

_____ Social Services 32-999

_____ Community Services 61-998

_____ Special Ed 21-874

_____ Data Processing 53-999

_____ Supt 41-701

_____ District Wide Forms 41-750

_____ Technology 63-999

_____ Food Service 35-938

_____ Transportation 34-939

_____ Human Resources 41-727

_____ Community 61-998

_____ Other 99-999

COMMENTS _____

BUDGET CODE (IF APPLICABLE) _____

SUPERVISOR APPROVAL _____

COPY INSTRUCTIONS - PLEASE COMPLETE

_____ 1 TO 1 (SINGLE SIDED ORIGINAL TO SINGLE SIDED COPY)

_____ 1 TO 2 (SINGLE SIDED ORIGINAL TO DOUBLE SIDED COPY)

_____ 2 TO 2 (DOUBLE SIDED ORIGINAL TO DOUBLE SIDED COPY)

_____ COLLATED SETS _____ UN-COLLATED

_____ STAPLE UPPER LEFT CORNER _____ STAPLE LEFT SIDE

_____ CARD STOCK (___ WHITE ___ BLUE ___ BUFF ___ GREEN ___ YELLOW)

_____ NCR PAPER (___ 2 PART W/Y ___ 3 PART W/Y/P ___ 4 PART W/Y/P/G)

_____ BOUND BOOK (125 PAGE MAX)

_____ RETURN _____ WILL PICK UP

FOR KEY OPERATOR:

DATE & TIME RECEIVED _____

DATE COMPLETED _____

NCR CHARGE: \$ _____

CARD STOCK: \$ _____

BINDING: \$ _____

COLOR COPY: \$ _____

COLOR PAPER \$ _____

TOTAL DUE: \$ _____