

PLEASE  
FILL OUT  
ALL THAT  
APPLY TO  
YOUR  
ORDER

PRINT SHOP USE ONLY  
JOB No. \_\_\_\_\_

DISTRICT PRINT SHOP  
Request for Printing Services

*(Please Print)*

School \_\_\_\_\_

Name (s) \_\_\_\_\_

Date Request Sent \_\_\_\_\_ Date Needed \_\_\_\_\_

NO. OF ORIGINALS \_\_\_\_\_ NO. OF COPIES \_\_\_\_\_

DESCRIPTION OF ORIGINALS \_\_\_\_\_

**CHECK THOSE THAT APPLY**

One Sided \_\_\_\_\_ Two Sided \_\_\_\_\_ Collated \_\_\_\_\_

STAPLED: Once \_\_\_\_\_ Twice \_\_\_\_\_ 3 hole punch \_\_\_\_\_

\*COLOR PAPER PINK \_\_\_\_\_ BLUE \_\_\_\_\_ YELLOW \_\_\_\_\_ GREEN \_\_\_\_\_

\*INDEX \_\_\_\_\_  
\*CARBONLESS PAPER 2 Part \_\_\_\_\_ 3 Part \_\_\_\_\_ 4 Part \_\_\_\_\_  
*\* A CHARGE WILL BE INCURRED FOR CARBONLESS, INDEX AND SPECIAL ORDER PAPER*

**PLEASE USE THE FOLLOWING SPACE TO ORDER FORMS (include form numbers),  
AND ANY SPECIAL INSTRUCTIONS FOR YOUR REQUEST.**

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Principal or Designee Signature

To place on-line orders visit our website @ <http://dsf.vvsd.org/dsf/>

FIRST TIME USERS MUST REGISTER