

Bible Way Church

OF ATL'S ROAD

Date Submitted: _____ Ministry/Department Account Code: _____

Ministry/Department: _____ Phone Number: _____

Document Title: _____

Person completing form (signature required): _____

Approved by (signature required): _____

Graphic Design needed? YES NO If so, please call to schedule consultation at 803.647.9148.

- | | | | |
|--|---------------------------------|----------------------------------|---|
| <input type="checkbox"/> Photo / Scans | <input type="checkbox"/> DTP | <input type="checkbox"/> CD Burn | <input type="checkbox"/> Business Cards |
| <input type="checkbox"/> Brochure | <input type="checkbox"/> Poster | <input type="checkbox"/> Flyer | <input type="checkbox"/> Other: _____ |

Number of pages submitted? _____ Number of copies (sets) needed? _____

Special instructions: _____

Request consultation/meeting with Communications/Marketing Departments? YES NO

JOB SPECIFICATIONS

SIZE PAPER ON WHICH JOB IS TO BE PRINTED AND DUPLEX OPTION

- | | | |
|--|--|---|
| <input type="checkbox"/> 8.5 x 11 | <input type="checkbox"/> 8.5 x 14 | <input type="checkbox"/> 11 x 17 (white only) |
| <input type="checkbox"/> 5.5 x 8.5 (two images per page) | <input type="checkbox"/> 4.25 x 5.5 (four images per page) | |
| <input type="checkbox"/> Job to be printed on FRONT AND BACK | <input type="checkbox"/> Job to be printed on FRONT AND BACK | |

PAPER TYPE OPTIONS

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> 28lb. (regular white) | <input type="checkbox"/> Color paper (select below) | <input type="checkbox"/> 65lb. (medium cardstock) | <input type="checkbox"/> 80lb. (heavy cardstock) |
|--|---|---|--|

COVER OPTIONS

- | | | |
|---|--|--|
| <input type="checkbox"/> Does your job require a cover? If so, please select: | <input type="checkbox"/> Plain paper cover | <input type="checkbox"/> Cardstock cover |
| | <input type="checkbox"/> Plain white paper cover | <input type="checkbox"/> Plain white cardstock |
| | <input type="checkbox"/> Colored paper cover | <input type="checkbox"/> Brilliant white cardstock |
| | _____ | <input type="checkbox"/> Ivory cardstock |
| | Select from colors below. | <input type="checkbox"/> Ivory linen cardstock |
| | | <input type="checkbox"/> Gray cardstock |

COLOR PRINTING OPTIONS

- | | | |
|---|---|-------------------------------------|
| <input type="checkbox"/> Black and white on white paper | <input type="checkbox"/> Black and white on colored paper | <input type="checkbox"/> Full color |
|---|---|-------------------------------------|

COLOR PAPER OPTIONS

- | | | | | |
|---------------------------------|------------------------------------|-------------------------------------|--------------------------------|-------------------------------------|
| <input type="checkbox"/> Pink | <input type="checkbox"/> Fuchsia | <input type="checkbox"/> Red | <input type="checkbox"/> Blue | <input type="checkbox"/> Light Blue |
| <input type="checkbox"/> Purple | <input type="checkbox"/> Lavender | <input type="checkbox"/> Periwinkle | <input type="checkbox"/> Green | <input type="checkbox"/> Lime Green |
| <input type="checkbox"/> Yellow | <input type="checkbox"/> Goldenrod | <input type="checkbox"/> Orange | <input type="checkbox"/> Ivory | <input type="checkbox"/> Gray |

* Please note that the Print Shop may contact you concerning your order if appropriate selections are not made.

- Check here if product is to be FOLDED.
- Check here if product is to be CUT.
- Check here if product is to be LAMINATED.
- Check here if product is to be PADDED.
- Check here if product is to be COMB BOUND.
- Check here if product is to be COLLATED.
- Check here if product is to be STRIP BOUND.
- Check here if product is to be THREE-HOLE PUNCHED.
- Check here if product needs to have HOLES DRILLED.
- Check here if product is to be REDUCED or ENLARGED.

Please list desired paper size of reduced/enlarged product: _____

BUSINESS CARD INFORMATION

A standard business card order consists of 500, one-sided, 2x3.5 cards. If larger amounts and double-sided printing are required, please indicate below.

_____ Number of cards needed (multiples of 500 please)

- Single-sided Double-sided

Please write your information in the box, or attach a card to the form.

FRONT

BACK

PLEASE DO NOT WRITE BELOW THIS LINE. FOR PRINT SHOP USE ONLY.

Date Received: _____ Date Completed: _____

Final documents received by (signature required): _____

Beginning Meter Reading _____	End S. binding _____
Ending Meter Reading _____	Begin S. Binding _____
Copies Printed _____	No S. Binding _____

Printer's Initials: _____ Machines Used: _____

Notes: _____