

**ORDER FORM
FOR
BOCES PRINTING SERVICES**

NEWFIELD CENTRAL SCHOOL

Order Date _____ Completion Date _____

Order No. _____ (Please refer to your Order No. if there are questions concerning your job)

Person Placing Order _____

School District _____ Building or Dept. _____

Quantity _____ Size of paper _____

(Is this a full year's supply? _____) Type of paper _____

Color of ink _____ 2nd Color (if Needed) _____

Is this job "padded"? _____ How many copies per pad? _____

Is this job perforated? _____ (Specify location of perforations on attached copy)

Is this job numbered? _____ If so, starting # _____, ending # _____

Is this job folded? _____ To what dimensions? _____

Is this job Single Sided _____ or Back to Back? _____

Is this job 3 Hole Punched? _____ Is this job Coil Bound? _____

Is this job Stapled? _____

Are there any special instructions or requirements? _____

Has this job been done previously? _____ (Please make sure a copy is attached to this form)

Are there any changes from the previous job? (Yes) _____ (No) _____

Please specify these changes _____

Authorization _____

Copy #1 - Person Placing Order
Copy #2 - BOCES Printing Services
Copy #3 - Packing List Copy