



INSTRUCTIONS - HOW TO USE ELECTRONIC FORM

- **DOWNLOAD FORM TO YOUR DESKTOP.**
- Open form in **Adobe Acrobat Reader**. You must use Acrobat Reader for info to save properly. If you do not have Reader contact your tech person.
- Type in information.
- **SAVE AS** and save **pdf** as description name.
- **Email** completed form to **printshop@ahschools.us** or **fax to 763-506-1590**.
- Attach any additional files with this form in your email.
- You will receive a confirmation email within 24 hours of submitting request.

office: **763-506-1340** Job # _____
 fax: 763-506-1590
 email: printshop@ahschools.us

GENERAL INFO

Today's Date: _____ Printed Project Completion Date: _____
 Building/Dept: _____ Budget Code: _____ - **383** - _____
 Description: _____ New Revised Per Sample
 Name: _____ Phone: _____ Email: _____
First and Last Name - PLEASE PRINT

DESIGN

Proofing Contact: _____ Phone: _____ Email: _____
First and Last Name - PLEASE PRINT
 Electronic file saved: Disk/Flash Drive District Wide Server - **Printshop Dropbox**
 E-mailed to: Ron H. Julie M. Roni C. Elaine G. Other: _____
 Special Instructions: _____

PRINTING

Quantity Needed: _____ 1 sided 2 sided Finished Size: _____
PAPER Color: White Color: _____ **INK COLOR** Full Color _____
 Weight: Regular Cardstock Other: _____ Black _____

LARGE POSTER

Quantity Needed: _____ Size: 18x24 24x36 36x48 Other: _____
PAPER: Text (thin) Matte (cardstock) Gloss (heavy weight) Tyvek (banner) Laminate
(small quantities only)

FINISHING

Collate Collate (i.e.: 1, 2, 3; 1, 2, 3; 1, 2, 3; etc...) Collate, Staple Collate, Staple, Fold
Folding Fold Letter Fold Half Other _____
Binding Comb Spiral Staple Unibind Other _____
Mark 50 sheets 100 sheets Other _____
Pad 50 sheets 100 sheets Other _____
Breakdown Distribution list provided Other _____
Other Trim (finished size) _____ Drill 3 hole punch Perforate Score
 Special Instructions: _____

DELIVERY

CALL FOR PICKUP Name: _____ Phone: _____
First and Last Name - PLEASE PRINT
 SHIP TO Name: _____ Building: _____
First and Last Name - PLEASE PRINT

PRINT SHOP USE ONLY – SHIPPING INFORMATION

<input type="checkbox"/> District Truck	<input type="checkbox"/> Delivered	<input type="checkbox"/> Pickup	Number of Boxes: _____	Date: _____
<input type="checkbox"/> Mail Truck	<input type="checkbox"/> Other	<input type="checkbox"/> Dock		
<input type="checkbox"/> Shelf		<input type="checkbox"/> Office	_____	Cost: _____

THANK YOU FOR YOUR ORDER!