DEPARTMENT CONTACT INFO:

*Dept. Name ______________________________________
*Your Name ______________________________________
*Phone ___________________________ *ML ________

HELP US MAINTAIN OUR DATABASE:

Previous orders may be found under:

○ My Name ○ Other ___________________________

Going forward: ○ Keep our Dept. Contact the Same
                 ○ I will be the NEW Dept. Contact

NEED BY: ○ Normal turn-around (5-7 days) ○ RUSH Requested by: ___________________________
            (may be subject to surcharge)

CHARGE TO ACCOUNT: G/L Account _______ *Fund _______ *Cost Center _______ Function _______ Grant _______

6 digits 1 letter, 6 digits 10 digits 1 digit 10 digits

DEPARTMENT CONTACT INFO:

*Building ___________________________ *Room _______ *Attn ___________________________ Phone/Cell _______

Special Instructions ___________________________

ITEMS NEEDED: QTY (in 500’s) IS THIS A PREVIOUS

NEEDED REPRINT? JOB # if

available

☐ 8½ x 11 LH Watermark† ☐ ☐
☐ 8½ x 11 LH Bond† ☐ ☐
☐ 5½ x 8½ Memo Bond ☐ ☐
☐ #10 Regular Env ☐ ☐
☐ #10 Window Env ☐ ☐
☐ #9 Business Reply Env ☐ ☐
☐ #6½ Regular Env ☐ ☐
☐ #6½ Window Env ☐ ☐
☐ 6x9 Booklet† Env ☐ ☐
☐ 6x9 Catalog† Env ☐ ☐
☐ 9x12 Booklet† Env ☐ ☐
☐ 9x12 Catalog† Env ☐ ☐
☐ 10x13 Booklet† Env ☐ ☐
☐ 10x13 Catalog† Env ☐ ☐

TIPS:

• Quantity: Min. order 250; Best Price 1000.
  Order in lots of 500. Higher quantity = less cost/sheet.

• Please save your job number for next time

† Watermark: has UC seal embedded; Bond: plain paper

‡ Booklet: has flap on LONGER edge; Catalog: flap is on SHORTER edge

TYPICAL LETTERHEAD INFORMATION:

Dept. or College Name ___________________________
Div. or Program Name ___________________________
University of Cincinnati ________________________
PO Box XXXX ________________________________
City, ST Zip+XXXX (ML) ________________________
Building Name ________________________________
Street Address ________________________________
Phone _______________________________________
Fax _________________________________________
Email ______________________________________
Web _________________________________________

TYPICAL ENVELOPE INFORMATION:

Dept. or College Name ___________________________
Div. or Program Name ___________________________
University of Cincinnati ________________________
PO Box XXXX ________________________________
City, ST Zip+XXXX (ML) ________________________
Building Name ________________________________
Street Address ________________________________
Phone _______________________________________
Fax _________________________________________
Email ______________________________________
Web _________________________________________

SPECIAL INSTRUCTIONS:

We are so much more than stationery: DESIGN | HIGH QUALITY, FULL COLOR PRINTING | FINISHING | MAILING

contact Karen Kappen for a quote on your next project: karen.kappen@uc.edu or 513-556-5045

Expect a proof within 2 days. If you do not, please contact Jill Siry: jill.siry@uc.edu or 556-3213