



Quote needed
(check box if submitting
this form for a quote)

Phone: 607-255-2524
Fax: 607-255-4319
E-mail: digital@cornell.edu
Web: bigredprint.cornell.edu

Due Date: _____ **JOB #:** _____

Revised Due Date: _____ Received Date: _____

Production Notes: _____

CUSTOMER INFORMATION (* required fields):

* Contact: _____

* Department: _____

* Email: _____

* Phone: _____

* Shipping Address: (Must Complete)

* Room Number: _____

* Type of Account (please choose one)

- Department Account (enter below) Invoice
- Purchasing Card (please call) Pay at Pickup
- Credit Card (please call)

* Account Number: _____

PRINTING DETAILS:

Ink Color: Black & White Color
 Color Cover with Black Text

Number of Pages: _____

Sides Printed: Simplex (1-sided) Duplex (2-sided)

Collate: Yes No

Flat Size: 4" x 6" 6" x 9" 12" x 18"
 4.25" x 5.5" 8.5" x 11" 13" x 19"
 5.5" x 8.5" 8.5" x 14" Other: _____
 5" x 7" 11" x 17" _____

Folded Size (if needed): _____

Paper: Text Weights: 20/50# text 24/60# text 28/70# text 32/80# text 40/100# text 80# coated text 100# coated text
Cover Weights: 80# uncoated 100# uncoated 80# coated cover 100# coated cover 12pt coated one-side cover 12pt coated two-side cover

Other Paper not listed: _____

Paper Color (if other than white): _____

JOB DESCRIPTION:

* Job Name: (Must Complete)

Quantity: _____

Special Instructions:

Proof Required: YES NO

Type of Proof Requested: Printed Proof PDF

OFFICE USE ONLY

Proof Out: _____ Proof In: _____

Revised File—Need New Proof

Type of Proof Requested: Printed Proof PDF

Rev Out: _____ Rev In: _____

OK to Print OK to Print with Revised File

Run Size: _____ #up: _____ Sheets: _____

BINDERY DETAILS:

Binding: None Staple (Top Left Corner) Staple (Two On Left side) Saddle Stitch (Fold/Staple) Coil/Spiral (Plastic) __MM Tape Perfect bind (Soft Cover)

Folding: Half Fold Tri Fold Z Fold Self Mailer Half Fold & Half Fold Again
Text: Head In Head Out

Other: Score Perf 3-hole punch Laminate Shrink Wrap

LARGE FORMAT

Print on Gloss Print on Matte Print on Vinyl Mount on Foam Core Mount on CoruPlast Laminate Matte Gloss Insert Grommets

Special Instructions:

OFFICE USE ONLY

Printing: _____

CT/Proofs: _____

Bindery: _____

Other: _____ **TOTAL:** _____