PRINTING REQUEST

EUGENE BRUCKER EDUCATION CENTER  •  ANNEX 5, 4100 NORMAL STREET, SAN DIEGO, CA 92103  •  (619) 725-7446  •  E-mail  pservice@sandi.net

San Diego Unified
SCHOOL DISTRICT

Orinigator _______________________
Telephone _______________________
Department _______________________
Location/Room No. _______________
Budget No. _______________________
Date Prepared ____________________
Date/Time Needed _________________

Identifying Title ____________________________
Quantity To Print _________________________
No. of Originals _________________________
Enlarge To _____________________________
Reduce To _____________________________

☐ One side  ☐ Two side
☐ Head/Head  ☐ Head/Foot
☐ Head/Foot

☐ 2 Hole Punch  ☐ 3 Hole Punch
☐ Saddle Stitch  ☐ Coil Bind
☐ Collate/ Staple

☐ Collate Only
☐ Fold ______ Fold in half
☐ _____ letter fold

☐ 5 Position Tab
☐ Full Color

☐ Pad 25 50
☐ 100  ______

☐ Envelope type #10
☐ other ______
☐ Sealed
☐ Un-sealed

☐ # of page inserts ______

[ ] District’s Print Shop has declined this Printing Request for the following reason(s):

____________________________________________________

By: ____________________ Date: ____________________

(Print Name)

REQUESTER: ATTACH THIS FORM TO YOUR REQUISITION TO PROCESS WITH AN OUTSIDE VENDOR

See Procedure No. 7038 Regarding Copyright Restrictions and Procedure No. 5606 Regarding Printing Policies.