

# PRINTING ORDER FORM

Date Submitted

Required Date

Job Number

Quote Ref#

Cost

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via Gate 11 Botany Street, Level 1, 157 Mathews Building, Kensington, NSW 2052

Please use Adobe Acrobat Reader (free to download from [here](#)) or a full version of Adobe to complete this form

T: (02) 9385 3222 E: [unswprint@unsw.edu.au](mailto:unswprint@unsw.edu.au)

## CLIENT DETAILS (Required prior to order being processed)

Submitted by		Tel/Extn.		Email		
Position/Title		School/Department		Building/Location No.		Room

## PAYMENT METHOD

<input type="checkbox"/> Account (Please complete details below)	<input type="checkbox"/> EFTPOS Payment Received		
Financial Approver:	Authorised by:	Date:	
Account	Fund	Department ID	Project

## JOB SUMMARY

N# Pages	N# Copies	Flat Sizes	Finished Sizes	Product Description
<input type="radio"/> Quote Required * Allow 24 hours	Quote Accepted	<input type="radio"/> Hard Copy Proof	Proof Approved	Date
Date				
		<input type="radio"/> 1st Proof	<input type="radio"/> 2nd Proof	<input type="radio"/> 3rd Proof

## PRINTING COVER

# Pages	# Copies	Cover Printing	Cover Stock	Cover Page Orientation	Cover Printing Preference
		<input type="checkbox"/> Colour <input type="checkbox"/> B&W	<input type="checkbox"/> White <input type="checkbox"/> Coloured	<input type="checkbox"/> Portrait <input type="checkbox"/> Landscape	<input type="checkbox"/> Duplex <input type="checkbox"/> Single Sided
		White, Uncoated, Satin & Gloss	A4 Coloured Stock 160gsm	A3 Coloured Stock 120gsm	

## PRINTING TEXT

# Pages	# Copies	Text Printing	Text Stock	Text Page Orientation	Text Printing Preference
		<input type="checkbox"/> Colour <input type="checkbox"/> B&W	<input type="checkbox"/> White <input type="checkbox"/> Coloured	<input type="checkbox"/> Portrait <input type="checkbox"/> Landscape	<input type="checkbox"/> Duplex <input type="checkbox"/> Single Sided
		White, Uncoated, Satin & Gloss	A4 Coloured Stock 80gsm	A3 Coloured Stock 80gsm	

## FINISHING SERVICES

Binding	Drill	Binder	Folding
Staple	Other	Lamination	

## SPECIAL INSTRUCTIONS

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## DELIVERY OPTIONS

<input type="checkbox"/> Deliver	<input type="checkbox"/> Collect		
Deliver to	Room	Building/Location No.	Received by
Received by	Date		Date

## QA Check - Specifications

Paper	Printing Header	Simplex/Duplex	Size	Weight	#Pages	# Copies	Completed
White	<input type="checkbox"/> B/W <input type="checkbox"/> COL	<input type="checkbox"/> S/S <input type="checkbox"/> D/S					
White	<input type="checkbox"/> B/W <input type="checkbox"/> COL	<input type="checkbox"/> S/S <input type="checkbox"/> D/S					
White	<input type="checkbox"/> B/W <input type="checkbox"/> COL	<input type="checkbox"/> S/S <input type="checkbox"/> D/S					
White	<input type="checkbox"/> B/W <input type="checkbox"/> COL	<input type="checkbox"/> S/S <input type="checkbox"/> D/S					
Tinted	<input type="checkbox"/> B/W <input type="checkbox"/> COL	<input type="checkbox"/> S/S <input type="checkbox"/> D/S					
Cover	<input type="checkbox"/> B/W <input type="checkbox"/> COL	<input type="checkbox"/> S/S <input type="checkbox"/> D/S					
Insert	Per Book _____						
Tabs	T view _____	Set Per Book _____					
Parchment	<input type="checkbox"/> B/W <input type="checkbox"/> COL	<input type="checkbox"/> S/S <input type="checkbox"/> D/S					

## QA Check Stock / Quality / Finishing

OPERATOR	PRODUCTION	FINISHING

## QA Check Quality / Quantity

Staples	<input type="checkbox"/> Corner <input type="checkbox"/> Dual		
Saddle	<input type="checkbox"/> Manual <input type="checkbox"/> Machine		
Drill	<input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> Manual		
Fold	<input type="checkbox"/> DL <input type="checkbox"/> Z <input type="checkbox"/> 1 Fold		
Guillotine	<input type="checkbox"/> 15min <input type="checkbox"/> 30min <input type="checkbox"/> 45min <input type="checkbox"/> 60min		
Other	<input type="checkbox"/> Shrink <input type="checkbox"/> Laminate <input type="checkbox"/> A4 <input type="checkbox"/> A3		
Binding	<input type="checkbox"/> Comb <input type="checkbox"/> Wire <input type="checkbox"/> Spiral <input type="checkbox"/> Tape		
Boxes			

## Delivery

Name:	# of Boxes	Delivery Date:
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