

## Printing Estimate/Order Form Stationery

	JK Purchasing Contract:			Select Vendor:  Department Name:		
lob Due Date:			Project Name			
ccount Number:			Billing Address			
erson Placing Order:						
hone #	Fax #:				Zip	
voice Processed by: Name						
Phone # _						
UANTITY:						
Business Cards		Envelopes	Size	■ Note Sheet	s 5 <sup>1</sup> / <sub>2</sub> x8 <sup>1</sup> / <sub>2</sub>	
		Window Envelopes			nents Size	
		Letterheads	8 <sup>1</sup> / <sub>2</sub> x11	Other		
			Monarch			
X		x		x	Ship Flat Ship Flat	
	Folds to	x	Folds to	X	Ship Flat	
X						
RE-PRESS:	es 🔲 Color Proo	f	Output Disc provided	☐ Typesetting	☐ Merge Photos	
RE-PRESS:	es 🔲 Color Proo	f		_		
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RE-PRESS: 🔲 Cam	es	f				
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