

Publication Services Printing Request

600 Clinic Dr. | EOB 100 | Mobile, AL 36688 | Phone: 251-380-2828 | E-mail: publink@southalabama.edu

Rev. 7/18

DEPARTMENT		<input type="checkbox"/> PERSONAL	ACCOUNT NUMBER (REQUIRED)	
PERSON SUBMITTING REQUEST: Mr./Mrs./Dr. (First Name, Last Name)				
ADDRESS				TELEPHONE NUMBER
COMPLETION DATE REQUIRED (Please give exact date)			DATE SUBMITTED	
DESCRIPTION OF JOB (Sample Recommended)				<input type="checkbox"/> FILES E-MAILED
SIZE	NUMBER OF PAGES	QUANTITY		
PRINTED: <input type="checkbox"/> One Side <input type="checkbox"/> Two Sides		TYPE OF PAPER (Bond, Heavy Weight, etc. Provide sample if available)		
COLOR OF PAPER		INK COLOR(S)		
<input type="checkbox"/> Copy from original		<input type="checkbox"/> Needs Design		<input type="checkbox"/> Add Logo
<input type="checkbox"/> E-mail Proof				
FINISHING INSTRUCTIONS				
<input type="checkbox"/> COLLATE <input type="checkbox"/> STAPLE <input type="checkbox"/> FOLD: <input type="checkbox"/> Letter-fold <input type="checkbox"/> Z fold <input type="checkbox"/> Half fold <input type="checkbox"/> Quarter fold <input type="checkbox"/> Heading In <input type="checkbox"/> Heading out				
<input type="checkbox"/> NUMBER From _____ To _____				
<input type="checkbox"/> Pad (<input type="checkbox"/> Top <input type="checkbox"/> Side) No. of copies to each pad _____ No. of Pads _____				
BINDING		SHRINKWRAP		
<input type="checkbox"/> Spiral Bind <input type="checkbox"/> Perfect Bind <input type="checkbox"/> Mount		<input type="checkbox"/> One Hole* <input type="checkbox"/> Three Hole*		
<input type="checkbox"/> Coil <input type="checkbox"/> Comb <input type="checkbox"/> Tape Bind <input type="checkbox"/> Perforate*		<input type="checkbox"/> Individually <input type="checkbox"/> Two Hole* <input type="checkbox"/> Five Hole*		
*Requires sample				
<input type="checkbox"/> Delivery Location:				
OTHER SPECIAL INSTRUCTIONS/REQUIREMENTS:				
<p>COPYRIGHT: The printer assumes no liability of any kind in connection with the presence or absence of proper acknowledgement of copyright notices. The legality of copy furnished for printing on any such works is the sole responsibility of the customer. Responsibility lies with the customer to obtain correct copyright notice and should be attached with all material submitted. Permission from legal owner should be furnished by customer for reproduction of copyrighted material. The customer is responsible for securing all licenses for copyright protected materials, whether camera ready or electronic, before submitting art to the printer.</p>				