



**State of Utah
Division of Finance
Inter-Departmental Transfer**

COPY CENTER USE ONLY

XEROX JOB #

LINX JOB #

PO/MA# _____

Customer Finet Codes

FUND	DEPT	UNIT	APPROP	ACTIVITY	FUNC	PROG	PHASE	NSACCT

Name	Phone	Today's Date
Dept. / Agency	E-Mail Address	Job Due Date
Address / Suite#	FAX: (801) 538-8635 Call for pick-up: (801) 538-8631 / 330-6402	Delivery? <input type="checkbox"/> Yes <input type="checkbox"/> No
Job Name	<input type="checkbox"/> Digital Printing: <input type="checkbox"/> Disk <input type="checkbox"/> Hardcopy <input type="checkbox"/> Electronic File <input type="checkbox"/> Other _____	

Document Type	Quantity Needed	Paper Description	Page Size	Sides	Collation
<input type="checkbox"/> Black & White <input type="checkbox"/> Color	Copies / Prints # Of Originals = Total Clicks	20 lb white standard Color White <small>Enter paper color above</small>	8 1/2 X 11 8 1/2 X 14 11 X 17	1:1 2:2 as:is	1 2 3 1 1 2 2

Binding <input type="checkbox"/> COIL <input type="checkbox"/> COMB <input type="checkbox"/> VELO <input type="checkbox"/> TAPE	Bind Color _____	Index Cover Stock Front Back _____	Covers, Sides To Be Printed Front: <input type="checkbox"/> Outside <input type="checkbox"/> Inside <input type="checkbox"/> Both <input type="checkbox"/> None Back: <input type="checkbox"/> Inside <input type="checkbox"/> Outside <input type="checkbox"/> Both <input type="checkbox"/> None
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Stapling <input type="checkbox"/> Hand Stapling Face Trim? <input type="checkbox"/> Yes <input type="checkbox"/> No	Drilling _____	Folding Text: IN OUT	Cutting DIMENSIONS X _____	Padding NO. OF PADS PAGES PER PAD	<input type="checkbox"/> Insert <input type="checkbox"/> Collate	Tabs _____	Pouch Lamination 8 1/2 X 11 8 1/2 X 14 11 X 17
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Special Instructions <input type="checkbox"/> Archive on Disk Customers Proof Sign Off _____	Cost Description	Printing Cost \$
		Finishing Cost \$
		\$
		\$
		\$
		Total Job Cost \$

Received By: _____ Date: _____

Distributor: White - Xerox / Pink - Customer