

SMU Print Requisition Form



Instructions:

Enter as much information as possible. We will contact you if we have questions.

Once the form has been completed, email it to SMUPrint@xerox.com

If you require assistance, please email us at SMUPrint@xerox.com

PROJECT DETAILS:

Requester Name: _____

Department: _____

Phone Number: _____

Email address: _____

Project Name: _____

Description: _____

Comments/Notes: _____

PROOF REQUIREMENTS: _____

There is a cost for Hard Proofs and they will take additional time.

DELIVERY ADDRESS: (for Hard Proof and order delivery)

Company /
Department Name: _____

Street Address: _____

City: _____ Province: _____

Postal Code: _____

Attention to:
(including department) _____

Shipping Instructions: _____

KEY DATES:

Quote Required by: _____ Art File to be Supplied by: _____

Data File to be Supplied by: _____ Requested
Delivery Date: _____

TOTAL COST (before taxes):

FOAP to be charged: _____

COST APPROVAL SIGNATURE (must have signing authority for FOAP):

PRINT REQUIREMENTS

#

Item Description: _____

Paper/Substrate: _____

Quantity: _____ # of Versions: _____

Number of Pages: _____

Dimensions of Finished
piece: _____

Ink: _____

Bleed: _____

Sides: _____

Finishing /
Special Instructions: _____

Packaging
Requirements: _____

#

Item Description: _____

Paper/Substrate: _____

Quantity: _____ # of Versions: _____

Number of Pages: _____

Dimensions of Finished
piece: _____

Ink: _____

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Sides: _____

Finishing /
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ADDITIONAL NOTES: