



Ventura County Office of Education
Graphic Reproduction Services
5100 Adolfo Road, Camarillo, CA 93012
(805) 437-1310 • FAX (805) 389-4279

REPROGRAPHICS WORK ORDER

PRINT SHOP ONLY	Work Order #	
	Invoice #	
	In	Out

Department/Organization		Submitted by		Deliver to	
Location/Address				Phone <input type="checkbox"/> Call for Pick-up	
Today's Date		Date/Time Needed		Job Description/Form Number	
<input type="checkbox"/> Estimate Requested: Est. #		Estimate Price			
Check work required. (ATTACH SAMPLE IF POSSIBLE) <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Rerun <input type="checkbox"/> Typeset/design <input type="checkbox"/> Copier <input type="checkbox"/> Posters <input type="checkbox"/> Press <input type="checkbox"/> Bindery <input type="checkbox"/> Shipping <input type="checkbox"/> Other					

Authorized Signature	Charge to Account Number	District P.O. Number
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COPIER INSTRUCTIONS		BINDING INSTRUCTIONS		PRESS INSTRUCTIONS	
# of Originals	#. of Copies Each	<input type="checkbox"/> Collate <input type="checkbox"/> Insert		No. of Originals	No. of Copies Each
<input type="checkbox"/> Color Copier: Special Info		<input type="checkbox"/> Staple: <input type="checkbox"/> Corner <input type="checkbox"/> Margin <input type="checkbox"/> Saddle		PRINT <input type="checkbox"/> One Side <input type="checkbox"/> Two Sides	
PRINT SIDES <input type="checkbox"/> 1>1 <input type="checkbox"/> 1>2 <input type="checkbox"/> 2>2 <input type="checkbox"/> 2>1		<input type="checkbox"/> Fold: <input type="checkbox"/> Single <input type="checkbox"/> Letter <input type="checkbox"/> Double		<input type="checkbox"/> Head to Head <input type="checkbox"/> Head to Foot	
COLLATE: <input type="checkbox"/> yes <input type="checkbox"/> no		<input type="checkbox"/> Punch _____ holes at _____		Paper Size _____ x _____	
Paper Size		<input type="checkbox"/> Pads _____ at _____ sheets		Paper Stock	
<input type="checkbox"/> Letter <input type="checkbox"/> Legal <input type="checkbox"/> Tabloid <input type="checkbox"/> Tabs <input type="checkbox"/> Other		<input type="checkbox"/> Binding:		Paper Color	
Paper Stock	Paper Color	<input type="checkbox"/> Spiral: <input type="checkbox"/> Coil <input type="checkbox"/> Plastic Comb		INK: <input type="checkbox"/> 4cp (Full color) <input type="checkbox"/> Black only	
		Color _____		<input type="checkbox"/> Black & 1color	
		<input type="checkbox"/> Perfect binding <input type="checkbox"/> Planax		<input type="checkbox"/> Spot color only ① _____ ② _____	
		<input type="checkbox"/> Shrink Wrap: Pkgs of _____			
		<input type="checkbox"/> Laminating # sq.ft. _____			
		<input type="checkbox"/> Other _____			

<input type="checkbox"/> Large Format (Posters) # of Originals _____ # of Each _____ Size _____ <input type="checkbox"/> Color <input type="checkbox"/> Black <input type="checkbox"/> Mounted Paper _____					
Special Instructions, Notes or Visual Aids _____					

GRAPHICS USE ONLY-ACCOUNTING REPORT							
GRAPHICS/TYPESSETTING		PREPRESS/PRESS		COPIER/BINDERY			
JOB IN _____ /JOB OUT _____		JOB IN _____ /JOB OUT _____		JOB IN _____ /JOB OUT _____			
Design Time <input type="checkbox"/> Minimum Hrs. _____		Plates <input type="checkbox"/> c248 <input type="checkbox"/> 9840 # _____		Copier Set-up <input type="checkbox"/> Scanning <input type="checkbox"/> Make-ready			
Materials _____ Cost _____		Press Time		Time _____ Materials _____			
Typesetting Time <input type="checkbox"/> Minimum Hrs. _____		Set up: Time _____ # of Sheets _____		BINDERY			
Scanning <input type="checkbox"/> Graphics <input type="checkbox"/> OCR		Run: Time _____ # Impressions _____		Collate: <input type="checkbox"/> Machine: Set-Up _____ R _____			
<input type="checkbox"/> Slides # _____		Outs _____ Sides _____ Size _____		Staple <input type="checkbox"/> Machine <input type="checkbox"/> Hand: Time _____			
OUTPUT		Materials _____ Cost _____		Fold Set Up Time _____ Run Time _____			
Laserprint		Ink		Shrink Wrap Time _____			
<input type="checkbox"/> Letter <input type="checkbox"/> Legal <input type="checkbox"/> Tabloid # _____		<input type="checkbox"/> Pantone # _____ Mix Time _____		Laminating Time _____ #sq.ft. _____			
Special Paper _____				Bind			
Large Format				<input type="checkbox"/> Pad: Time _____ <input type="checkbox"/> Spiral: Time _____			
Size: #sq.ft.ea _____ # _____				Trim # of Cuts _____ Time _____			
Special Paper/boards _____				Shipping <input type="checkbox"/> U.S. <input type="checkbox"/> Courier			
Approval: Out _____ Returned _____				<input type="checkbox"/> Rubber Stamp <input type="checkbox"/> Label <input type="checkbox"/> Seal <input type="checkbox"/> Insert			
Approval: Out _____ Returned _____				# of Pieces _____ Time _____ Mat. _____			
Total Impressions		Total Labor		Materials		Tax	Total Cost