



Irvine Unified School District

- ☐ Call when done
☐ Ship to school/dept. site

NO. _____
 (# will be assigned by Print Shop)

PRINT SHOP WORK ORDER

Department/ School _____ Contact for questions: _____ Phone or Ext. # _____

BUDGET NO. _____ Date Sent _____ Date Due _____

Title or Description of Order LEGITIMATE EDUC. INTEREST TO REVIEW PUPIL RECORDS (old #75.80146)

PREPARATION: ☒ CAMERA READY (print from hard copy originals) ☐ TYPESETTING/PRE-PRESS WORK NEEDED
☐ ELECTRONIC FILE SENT ☐ SEND PROOF COPY Additional information _____ on file in Print Shop

**TOTAL QUANTITY
 (Sets) REQUIRED:** _____

MAIN ORDER:

NO. OF ORIGINALS (pages) 2
 in your document _____

Print the pages: ☐ 1 sided ☒ 2 sided ☐ as is

PAPERSTOCK:

Type of Paper 110 lb. INDEX

Paper Color WHITE

Finished Size 8" x 5"

☒ Black ink ☐ Color Copy ☐ Other _____

BINDERY: (check appropriate boxes)

- ☐ collate ☐ one staple ☐ single fold in half ☐ comb bind ☒ cut
☐ 3-hole punch ☐ two staples ☐ letter fold ☐ tape bind ☐ other _____

AUTHORIZATION: _____

ADDITIONAL INFORMATION: