



Armstrong Copy Shoppe Manual Order Form
 Please fill out completely for prompt service. Call Ext. 2999 with questions.

Instructor: _____

Telephone # _____

Dept. & Class: _____

Mail Code: _____

of Students:

Required for Class:

Optional for Class:

Page Layout

Semester

Covers

1 to 1

Fall

Front Cover Stock

1 to 2

Spring

Back Standard Paper

2 to 2

Summer I

Cover Paper Color: _____

Summer II

Finishing

Staple

Comb Binding

Thermal Binding Page #'s

3-Hole Punch

Spiral Binding

Shrink Wrap

Special Instructions

Office Use Only

Received Date _____

\$.08 per Copy/Print

Scanned Date _____

\$.05 Additional for Special Paper

Printed Date _____

\$1.00 Binding

Originals Returned _____

\$.25 Shrink Wrap

Job #: _____

File Name: _____