



Plotter/Banner Request Form

THIS AREA FOR PRINT SHOP USE ONLY

Date: _____

Date Required: _____

1. DESCRIPTION OF ITEM REQUESTED: (attach sample)

Number of Copies: _____ Number of Pages: _____

- One-sided
- Two-sided

2. FILE INFORMATION (As Applicable):

Printing Services will try to replace any poor-quality USC logos used in your document with print-quality ones.

Files Sent Via:

- Public Folder
- FTP Folder
- Files Copied from Customer Storage Device
- Disk Attached (Please label so it can be returned)
- Emailed to **artwork@printing.sc.edu**

Person Sending Email _____

Email Subject _____

(Please provide job description in the subject line of email.)

File Format: Macintosh IBM

- PDF, 100% of output size is provided. (Preferred)
- All art, links and fonts are provided.
- Reduced laser printout of document is provided.

3. PRINTING INSTRUCTIONS:

Media

- Heavy Bond
- Photobase
- Adhesive Vinyl
- Outdoor Vinyl
- Indoor Vinyl
- Other _____ (ex. clear static/window cling)

Print Size Dimension

- Same Size (100%)
- Enlarge/Reduce: _____%
- _____” x _____”
- Exact Size
- Approx. Size

Trim

- Trim for Bleed
- Trim for _____” Mount Edge
- Vinyl Raw Edge
- Vinyl Finished Edge

Mount

- Black Foamcore
- White Foamcore
- Black Gatorboard
- White Corex w/ _____ Stakes

Lamination and Other Services

- Laminate: Gloss _____ Matte _____
- Cling: Mounts on Front _____ Back _____
- Grommets _____ or Velcro _____
- Across Top _____ At Corners _____ Other _____
- Cardboard Easel Back: 12” _____ 24” _____
- Perimeter Trim (Frame-like Edging) _____
- Scan Photo/Image(s) _____

White - Printing Canary - Printing Pink - Department

4. PROOFING:

- Proof Requested
- E-mail PDF To _____
- Other _____
- No Proof Requested

SPECIAL INSTRUCTIONS

5. COPYRIGHT AUTHORIZATION:

The requestor warrants that permission to duplicate copyrighted materials has been obtained.

Signature _____

6. DEPARTMENT INFORMATION (REQUIRED):

Dept.: _____

Bldg.: _____ Room No.: _____

Phone: _____

Fax: _____

E-mail: _____

Contact Person: _____

Approved (Dept. Head) _____

7. ACCOUNT INFORMATION (REQUIRED)

Dept. No.	Fund No.	Object Code	
		52051	

FOR PRINT SHOP ACCOUNTING USE ONLY	
Printing:	\$
Other:	\$
Actual Cost:	\$

Date _____