

DA-104 PRINT REQUISITION FORM

Kansas Dept. of Administration - Office of Printing & Mailing
201 NW MacVicar, Topeka, Kansas 66606-2499

Date of Request:

Agency-Div. No.

Customer Service: 785-296-0189, 785-296-0533, 785-296-2796

Fax: 785-291-3770

Billing: 785-296-3631

Job Number:

Estimate Number:

IF PAPER NOT SPECIFIED - COLOR INK COPIES WILL BE PUT ON 28LB. BOND - BLACK INK - 60LB. ACCENT TEXT

ALWAYS SEND ARTWORK WITH YOUR DA-104

| | |
|--|---|
| PAYABLE CONTACT - Name/Phone - Fax - Agency - Address | SHIPPING ADDRESS (if different from billing address) |
| | |

| smart | DEPARTMENT I. D. | FUND | PROGRAM | BUDGET UNIT | ACCOUNT | GLBU - PROJECT I.D. | Cost - Amount |
|-------|------------------|------|---------|-------------|---------|---------------------|---------------|
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Use separate requisition for each job — Except Stock Forms or Business Cards
STANDARD BUSINESS CARDS ARE ON - 80LB. BRIGHT WHITE COVER

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|---|-----------------|---------------------|
| Name Of Requisitioning Agency /Division: | Date Needed | P.O.#-REQ.# |
| Contact | Phone #: | Fax #: |
| | Email: | Last Previous Job # |

Job Title: _____

New File Revised Reprint

| | | | |
|---------------------------|-----------------------|------------------------|---|
| Quantity to Print: | Width x Length | Number of Pages | Print: one sided only <input type="checkbox"/> two sided <input type="checkbox"/> head to head <input type="checkbox"/> head to foot <input type="checkbox"/> |
|---------------------------|-----------------------|------------------------|---|

Proof to: Name _____ Address _____ Email: _____

Email Hardcopy

| | | |
|--|--|---|
| File Submitted By: <input type="checkbox"/> Email <input type="checkbox"/> Hardcopy <input type="checkbox"/> FTP | Ink color: Text (inside) _____ Cover (outside) _____ | Paper Specifications: Text Paper (inside): _____ Cover Paper (outside): _____ |
|--|--|---|

Binding: Black Plastic Spiral Coil Perfect Bind MatchbookCover Saddlestitch Sidestitch Slip Sheet Staple 1 on Left Collate Only

| | | |
|---|--|---|
| Folding: <input type="checkbox"/> Tri-fold <input type="checkbox"/> Half-fold <input type="checkbox"/> Perforating <input type="checkbox"/> Mail Wafer Tabs | Crash Numbering: Begin With: _____ End With: _____ | Punching: <input type="checkbox"/> 2 Hole <input type="checkbox"/> 3 Hole <input type="checkbox"/> Spiral |
|---|--|---|

| | | | |
|---|---|---|---|
| NCR: <input type="checkbox"/> NCR Padding <input type="checkbox"/> NCR Sets | Pad At: <input type="checkbox"/> Top <input type="checkbox"/> Other _____ | Parts: <input type="checkbox"/> Two-part <input type="checkbox"/> Three-part <input type="checkbox"/> Other _____ | Packaging: <input type="checkbox"/> Shrink <input type="checkbox"/> Box |
|---|---|---|---|

Special Instructions: _____

PLEASE DO NOT WRITE BELOW THIS LINE