WESTERN NEW ENGLAND UNIVERSITY WNE

Information Only:

PRINTING SERVICES

Press Printing Request

Hours: Monday - Friday 7:00 a.m. - 4:00 p.m. Telephone: 413-782-1799 or 782-1302

Please contact Campus Post Office (ext. 1329)

for assistance in planning your mailing.

All envelopes, mailers, and postcards

require approval from Campus Post Office

Allow ten (10) working days for presswork not including weekends and holidays.			prior to submitting printing request.
Job Name			Special postal requirements apply.
\square 2 Samples attached	☐ 2 Samples attached with changes		REQUEST WILL BE RETURNED
Requested by: Phone:			IF NOT APPROVED BY CAMPUS POST OFFICE.
Todays Date:	Date Required:		For Mail Services only:
			Please proof and verify postal specifications. Attached sample(s) are correct and ready
Department:Budget Number: Delivery information: Deliver to		g)	for printing.
Hold for pick-up			Approved by:
			Date:
Envelopes	Quantity in 500s	Printing Specifica	ations
☐ # 10 official		Paper (specify)	
# 10 canary window		Text weightCover weight	
# 10 outlook (window)		1	
☐ #9 official		Trim size	
# 9 outlook (window)		Paper for letterhead & envelopes	
☐ Monarch $(7^{1/2} \times 10^{1/2})$		☐ All College (white)	
□ 9 x 12		☐ Law (Classic Natural White)	
□ 10 x 13		☐ President	(Strathmore Natural White)
Letterhead	Quantity in 500s	1	ors
□ Standard (8 $^{1/2}$ x 11)		List of color	s PMS 288 & PMS 130 (All University
☐ Monarch (7 $^{1/4}$ x 10 $^{1/2}$)			☐ PMS 202, 288, & 130 (Law)
Custom Printed Notecards & En	velopes		☐ PMS 144 & PMS 288 (Pharmacy)
\Box 3 ^{1/2} x 4 ^{7/8} folded for 4BAR		One side □	☐ Other
\Box 4 ^{1/8} x 5 ^{1/2} folded size for A2		One side Two sides # Of pages	
\Box 4 ^{5/8} x 6 ^{1/4} folded size for A6		# Of pages _	
\Box 5 x 6 ^{7/8} folded size for A7		Bleed	
☐ 4 BAR envelope			/3
☐ A2 envelope			= in out
☐ A6 envelope			ddle stitch)
□ A7 envelope		□ Score □	Perf 🗆 Microperf
NCR (carbonless paper)	Quantity in Sets	Special Instruction	ns
□ 2 part		<u> </u>	
☐ 3 part			
☐ 4 part			
☐ 5 part			
Printing Services	Date Received Copy	# C	of Plates

Date Complete _____ TOTAL ____

Initials _____