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Desig	m	Print	Mail	Scan			
OA DOCUMENT SOLUTIONS					JOB SPECIFICATIONS		
4720 SCRUGGS STATION ROAD, JEFFERSON CITY, P: 573.751.3307 MOPRINTMAIL.MO.GO				OADS CUSTOMER CODE	JOB NUMBER	R (COMPLETED BY OADS)	
CUSTOMER INFORMATION					AGENCY PO NUMBER FORM #, LIT #, DOC # (IF APPLICABLE)		
CONTACT PERSON							
					DOCUMENT TITLE		
ADDRESS ROOM NUMBER							
					DATE SUBMITTED DATE REQUIRED		
CITY			ZIP				
					TYPE OF JOB	I	PREVIOUS JOB NUMBER
DEPARTMENT DIVISION					□ NEW □ REVISED	EXACT REPRINT	
OFOTION/PROCEDAM							
SECTION/PROGRAM					BUSINESS CARDS - QUANTITY 250 500 1000		
TELEPHONE NUMBER AUTHORIZED BY			ED BY		☐ GRAPHIC DESIGN REQUESTED		☐ FILLABLE PDF
EMAIL ADDRESS					SENDING DOCUMENT FILES BY		
					□ EMAIL □ FLASH DRIVE □ MOFTP □ CD □		
ESTIMATE					NUMBER OF PAGES TOTA	AL NO. OF FINISHED PIE	CES FINISHED SIZE
GIVEN BY / ESTIMATE NUMBER DATE							
					☐ 1-SIDED ☐ 2-SIDE	D B&W C	COLOR BLEED
ESTIMATE AMOUNT QUANTITY					□ SHRINK WRAP □ HOLE PUNCH □ PAD □ BIND □ MAIL		
DELIVERY INFORMATION					(SPECIFY DETAILS BELOW IN THE JOB DESCRIPTION)		
ORGANIZATION NAME					I NEED TO SEE A PROOF BEFORE PPF PROOF  THE JOB GOES TO PRODUCTION PAPER PROOF		
DELIVER					SCANNING (PROVIDE DETAILS IN JOB DESCRIPTION)		
SHIP	CONTACT PERSON				☐ MAIL ☐ DOCUMENTS NUMBER OF BOXES		
□ PICK-UP					JOB DESCRIPTION		
ADDRESS ROOM NUMBER							
CITY			STATE	ZIP			
NO. OF BOXES	S RECEIVE	D BY SIGNAT	TURE	DATE			
X							
DELIVERY INSTRUCTIONS							
DATE DELIVERED BY (COMPLETED BY			BY OADS)	PRODUCTION COMPLETION	N DATE (COMPLETED BY	OADS)	
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