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Design	Print	Mail	Scan

Desig	m	Print	Mail	Scan	JOB SPECIFICATIONS					
OA DOCUMENT SOLUTIONS 4720 SCRUGGS STATION ROAD, JEFFERSON CITY, MO 65109 P: 573.751.3307 MOPRINTMAIL.MO.GOV				OADS CUSTOMER CODE JOB NUMBER			R (COMPLETED BY OADS)			
CUSTOMER INFORMATION				AGENCY PO NUMBER FORM #, LIT #,			IT #, DOC # (IF A	APPLICABLE)		
CONTACT PERSON			<u> </u>							
					DOCUMENT TIT	TLE .				
ADDRESS				ROOM NUMBER	DATE SUBMITTED DATE REQUIRED					
CITY			STATE	ZIP	- SALE GODINATED SALE NEGOTIALS					
CITY		STATE	ZIF	TYPE OF JOB			PREVIOUS JOB NUMBER			
DEPARTMENT DIVISION			□ NEW □ REVISED □ EXACT REPRINT							
						¬				
SECTION/PROGRAM			BUSINESS CARDS - QUANTITY 250 500 1000							
					☐ GRAPHIC DESIGN REQUESTED			FILLAI	☐ FILLABLE PDF	
TELEPHONE N	NUMBER	AUTHORIZED	BY		SENDING DOCUMENT FILES BY					
EMAIL ADDRE	:99				□ EMAIL □ FLASH DRIVE □ MOFTP □ CD □					
LW/IIL /IDDIIL	.00				NUMBER OF PA		IO. OF FINISHED P	IECES FINISH	HED SIZE	
ESTIMAT	E (GOOD FO	R 90 DAYS AT	THE QUANTITY	SHOWN)						
GIVEN BY / ESTIMATE NUMBER DATE			·	1-SIDED	2-SIDED	□ B & W □	COLOR	BLEED		
ESTIMATE AMOUNT QUANTITY			SHRINK W		LE PUNCH	PAD BIN	D MAIL			
DELIVERY INFORMATION			I NEED TO SEE A PROOF BEFORE							
ORGANIZATION NAME			JOB DESCRIPTION							
SHIP CONTACT PERSON										
☐ PICK-UP	CONTACT F	LHOON								
ADDRESS			ROOM NUMBER							
CITY			STATE	ZIP						
NO. OF BOXES RECEIVED BY SIGNATURE DATE			DATE							
DELIVERY INSTRUCTIONS										
					FUND	OBC	APPR	OBJ / SUB	REPT CAT	
DATE DELIVE	RED	DELIVERED B	Y (COMPLETED	BY OADS) 20	FUND	ORG	AFFR	/	NEFI CAI	
				12/				1		