

Requisition for Iowa Prison Industries Printing

Today's Date		Order Number	Number on backorder
DHS Form Name			DHS Form Number
Number of Copies <input type="checkbox"/> pads <input type="checkbox"/> sets <input type="checkbox"/> pieces		Revision Date	Minimum Quantity
Number of Plates	Sheets/Set	If printed both sides: <input type="checkbox"/> Flip <input type="checkbox"/> Tumble	Quantity to Central Office

Paper

Quality	Size	Weight	Color

Composing: New Copy Revised Proof required: Yes No
 Bindery: Collate Tape Spiral Staple: 1 2 3
 Padding: Top Left With backing Without backing
 Number of sheets to a set: _____ Number of sets to a pad: _____
 Punching: ___ holes at Top Left Distance center to center: _____
 Perforation: Top Left As indicated
 Folding: 1 2 Other as indicated: _____
 Keep in stock Stock on Hand: Destroy Use up

Special Instructions:

Blanket mailing attached: Yes No Due date to county offices: _____
 Samples needed for circular letter? Yes No If yes, quantity: _____
 Ship samples to: _____
 Special printing instructions: _____
 Electronic file attached
 Date requesting printing be completed by: _____

Forms Manager Signature
