



EBENEZER
AME CHURCH

Copy Request Form

General Information

Date Submitted: _____ **Date Needed:** _____

Name: _____ **Phone:** _____

Ministry: _____

Ministry Head Signature: _____

1. All originals must be received in the office at least 5 business days prior to needed date.
2. Special Handling or Bulk Mail (150 pieces or more) must be received in the office at least 15 business days prior to mail out date.
3. Fill out this form and attach it to your original(s).
4. You will be contacted at the phone number provided when the job is completed for copy disposition..

Original(s) one sided two sided

Copies one sided two sided one to two sided two to one sided

Number/Finish of copies: _____ Black & White Color

Collated Stapled 3-hole punched Booklets: binding combs spine staples

Finished size of copies:

8 ½ X 11 8 ½ X 14 11 X 17 Half Sheets ¼ Sheets

Type of paper:

White Color Card Stock Other preference