



# Publications Branch Work Order

Telephone 303-497-6465

Please complete all shaded areas.

Customer Name: <i>(Must be legible)</i>	Due Date	Tracking #
---	----------	------------

<b>PLEASE RUSH!!</b> (rush charges authorized) <input type="checkbox"/>	Phone No.	Bldg./Room #	Project No. or Cost Center
--	-----------	--------------	----------------------------

How will this work be used:	Assigned to Coordinator/Contractor:
-----------------------------	-------------------------------------

Sent to or picked up by:	Proof Copies? <input type="checkbox"/> Yes <input type="checkbox"/> No	Quality of work required: <input type="checkbox"/> Inexpensive <input type="checkbox"/> Average <input type="checkbox"/> Best
--------------------------	--	--

Task	Amount	Contractor	Date to Contractor	Date from Contractor	Type of Work

**Desktop Publishing**  Number of figures: Illustrations  Posters   
Please label each drawing with   
preferred File Name in lower  right corner.  File format: .EPS .PS .JPG .WMF .TIF .GIF Other   
Platform: UNIX MAC PC

Photo	No. of Originals	Copies Needed	Total Copies	Cropping Instructions	Paper Size
<b>PMT</b> (no negative made or required.) <input type="checkbox"/> Lustre <input type="checkbox"/> Film					
<b>Prints</b> (negative required or made) <input type="checkbox"/> Matte <input type="checkbox"/> Glossy					
<b>Transparencies</b> <input type="checkbox"/> B/W <input type="checkbox"/> Vu-graphs <input type="checkbox"/> Color <input type="checkbox"/> Slides <input type="checkbox"/> Dups					

**Film Processing** Prints: No. of Rolls \_\_\_\_\_ Print Size: 3 1/2 x5 4x6 5x7 Contact Sheet  
Slides:  No. of Rolls \_\_\_\_\_ Number of prints from each neg: \_\_\_\_\_

**Fast Copy** Number of Originals \_\_\_\_\_ Copies Needed \_\_\_\_\_ Total \_\_\_\_\_ Page Size \_\_\_\_\_  
 Color ink \_\_\_\_\_ X \_\_\_\_\_ = \_\_\_\_\_  
 Black Ink  Transparency  
 One Side  Collate  Drill  Cover  Reduce \_\_\_\_\_  
 Both Sides  Staple  Slip Sheet  Bind  Enlarge \_\_\_\_\_

**Printing** (Please attach required clearances) Description of Job \_\_\_\_\_  
No. of Originals \_\_\_\_\_ Finished Page Size  \_\_\_\_\_ Cover Stock \_\_\_\_\_  
No. of Copies \_\_\_\_\_ Ink Color \_\_\_\_\_ Text Stock \_\_\_\_\_  
Binding:  Saddle  Side  Perfect  Other

**Special Instructions:**  
  
 Deliver to 325 Broadway, Rm. 1207B  Customer/Courier will pick up from Vendor

Authorizing Signature	Today's Date
-----------------------	--------------

MASC Form 301-001 Mountain Administrative Support Center, Publication Group  
(Replaces NOAA Form 50-500) 11/98 MC5, 325 Broadway, Boulder, CO 80305  
WHITE-Office copy ■ PINK - Stays with Job ■ YELLOW-Customer Copy

FAX to:   303-497-3890  
Mail to:   Graphic Design & Graphic Support, MC414,  
  Dept. Of Commerce, Boulder, CO 80305  
Bring to:   Room 1107B, Bldg. One  
Questions:   Call 303-497-6465