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<b>JOB NAME/P.O. #:</b>		A.M.	P.M.	A.M.	P.M.	<b>DATE:</b>	
		<b>DEL:</b> <input type="checkbox"/> <input type="checkbox"/>		<b>PICK UP:</b> <input type="checkbox"/> <input type="checkbox"/>			

**SPECIAL INSTRUCTIONS:** \_\_\_\_\_

LARGE XEROX COPIES											
NO. OF ORIGINALS	SIZE	NO. OF SETS	BOND	VELLUM	TRANS. BOND	4-MIL MILAR	ENLARGE TO	REDUCE TO	BINDING Y or N	TOTAL	JOB NAME

COLOR COPIES									
NO. OF ORIGINALS	SIZE	NO. OF SETS	COLOR COPY	CARD STOCK	ENLARGE TO	REDUCE TO	TOTAL	JOB NAME	

MISCELLANEOUS						
NO. OF ORIGINALS	SIZE	NO. OF SETS	LAMINATING	MOUNTING	TOTAL	JOB NAME

XEROX COPIES												
NO. OF ORIGINALS	SIZE	NO. OF SETS	WHITE PAPER	SINGLE SIDED	DOUBLE SIDED	CARD STOCK	CLEAR COVER	THREE HOLE	GBC	SCREW POST	TOTAL	JOB NAME

**DELIVERY INSTRUCTIONS:** \_\_\_\_\_

818 SW Glenview Ct.  
 Port St. Lucie, Fla. 34953  
 Phone: 772-340-3430  
 Fax: 772-340-3034  
 Email: [chris@repro718.com](mailto:chris@repro718.com)

22 East Ocean Blvd.  
 Stuart, Fla. 34994  
 Phone: 772-419-2075  
 Fax: 772-419-2049  
 Email: [stuart@repro718.com](mailto:stuart@repro718.com)

2361 Vista Parkway  
 West Palm Beach, Fla. 33411  
 Phone: 561-640-5450  
 Fax: 561-640-5970  
 Email: [wpb@repro718.com](mailto:wpb@repro718.com)