Date Rcvd Date	<b>:</b>
----------------	----------

## RCCD Administrative Services Center Copy Center/Word Processing Requisition Form

CAADO Centennial Plaza 3801 Market Street, Riverside, CA 92501 (951) 222-8526 adminsupport.center@rcc.edu			
Name:		Phone/Extension:	
Required Date:	Time Needed:	Budget Code:	
Department:	Office#	Email:	
File Name/Subject:			
*** <u>Disclaimer:</u> If we feel	turn-around time is not feasible w	e will contact you for a discretionary solution.	
WORD PROCESSING	SING ***Please allow <b>4</b> working days***		
Service Type:  Word  Excel Power Point Adobe Acrobat PDF Interactive PDF Forms Transcribing	Document: New Revision Scrambled Final Copy		
Technician Use Only Technician: Folder Name:		nt Name: of Pages (New / Rev):	
COPY OPTIONS	COPY OPTIONS ***Please allow at least 3 working days***		
Exact # of Originals:  Copies Requesting:	Copy Options:  One Sided Two Sided Collate Stapled 3-Hole Punc Color (ink)	Paper Choices:  Regular Cardstock  Blue Salmon Green Yellow Pink White Paper Provided	
DISTRIBUTION:	COLLEGE / SATELL	TE:	
Adjunct Mailbox All Mailboxes Mailbox Mailroom Shelves Nursing Cabinet	Moreno Valley Norco Riverside Culinary Academy District Offices (Cent	Corona MVDEC (Dental) PSET/Ben Clark Rubidoux Hold for Pick-up	
Special Instructions:			
<b>Technician Use Only</b>			
· ·	Date Completed	Sheets Used:	
Packaging Type:Box/Package	Charges:	Paper Type: color / white / cardstock / ink	