



Print Request Form

Ministry/Committee Name:

Job Name:

Your name:

Ministry Area:

Your email address:

Your phone number:

****Copying and printing will be done in black and white only on white 8.5x11inched/20lb copy paper.**

****Materials to be copied must be submitted electronically and be complete.**

Quantity Needed?

Number of original pages?

One-sided or 2-sided?

Orientation (portrait or landscape)?

Top left stapled?

3-Hole Punched?

Special Instructions?

Date Materials Needed:

Will you be picking up your print job or do you need the materials shipped?

Pick Up Date and Time:

Shipping Address:

*****Ministry budgets will be charged for large print job materials, labor and postage**

Conference Office, 7481 Henry Clay Blvd., Liverpool, NY 13088

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