

RGCC Office Work Request



(Please allow 5 working days to process order. Attach originals or rough draft to work request.)

Name: _____ Phone: _____

Date: _____ Completion Date: _____

Order _____

- Copy: _____ Number of copies, plus original
- Type: _____ Single space _____ Double space _____ Other
- Paper: _____ White _____ Color _____ Card Stock
- Assemble: _____ Collate _____ Staple _____ Bind _____ Paper clip
 _____ Notebook _____ Folder _____ Envelope
- Design: _____ Handout _____ Flier _____ Bulletin Board _____ Reminder
 _____ Program _____ Poster _____ Reservation form
- Name of person(s) or committee _____
- Complete data on _____
- Mail _____ To _____
- Make arrangements for _____
- Distribute to _____
- Set up for meeting _____
 Time _____ Location _____
 Material _____ Food _____

Received By: _____ Date: _____

OFFICE USE ONLY

Assigned to: _____ Completed by: _____

Date: _____