

WORK ORDER REQUEST

LEGAL COPY CATS & PRINTING

300 SOUTH FOURTH STREET • LAS VEGAS, NV 89101

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Ordered By: _____	Sales Rep: _____
Firm Name: _____	Date: _____
Address: _____	Due Date: _____
Phone: _____	Time Due: _____
Client Matter No.: _____	

Please provide the following services for our firm:

COPIES: [Please Check] Number of Copies _____

- ___ Duplicate file as is (i.e. staples, clips, rubber bands, color for color)
- ___ Remove and replace post-it notes
- ___ Copy file labels on colored slip sheets
- ___ Copy tabs on colored slip sheets
- ___ Insert tab for tab
- ___ Color for color (___with text / ___without text (___ photos per page)
- ___ Bind copies as originals (___spiral, ___velo, ___acco)
- ___ Hole punch (indicate ___2, ___3, ___Euro, ___top, ___side)
- ___ Copy clipped or tagged documents only
- ___ Copy standard language
- ___ 2-sided for 2-sided
- ___ Convert 2-sided to 1-sided ___Convert 1-sided to 2-sided

SPECIAL INSTRUCTIONS: _____

VIDEO / AUDIO: Number of originals _____ Number of copies _____

SPECIAL INSTRUCTIONS:

BATES LABELING / BATES STAMP: (___Apply to Original Document / ___Apply to Copies)

Alpha Prefix _____ Space ___Y ___N Sequence Start _____ End Sequence _____

EXHIBITS: (Mounted on foam core) Kodak Color or Black & White - Size _____

___ Originals provided - SPECIAL INSTRUCTIONS: _____

BLUEPRINTS / MAPS: (Color or B&W) - Size _____

___ Originals provided - SPECIAL INSTRUCTIONS: _____