

Bill copy to: _____ Mail Code _____ Authorized Signature _____	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="text-align:center;">INDEX NUMBER</td></tr> <tr><td style="height: 30px;"> </td></tr> </table>	INDEX NUMBER								
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<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td rowspan="4" style="background-color: black; color: white; text-align: center; vertical-align: middle; font-weight: bold; font-size: 1.2em;">SHIPPING</td> <td style="padding: 2px;">Customer Contact _____ Phone _____</td> </tr> <tr> <td style="padding: 2px;">Dept _____ Fax _____</td> </tr> <tr> <td style="padding: 2px;">Building/Room _____</td> </tr> <tr> <td style="padding: 2px;"> Delivery by Mail Services Pickup at Center: CSC-A Geisel Library </td> </tr> </table>	SHIPPING	Customer Contact _____ Phone _____	Dept _____ Fax _____	Building/Room _____	Delivery by Mail Services Pickup at Center: CSC-A Geisel Library	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="text-align:center;">JOB NUMBER</td></tr> <tr><td style="height: 30px;"> </td></tr> <tr><td style="text-align:center;">PRICE \$</td></tr> <tr><td style="height: 30px;"> </td></tr> </table>	JOB NUMBER		PRICE \$	
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Please enter information below as you want it to appear on the business card.	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">DATE SUBMITTED</th> <th style="width:50%;">DATE DUE</th> </tr> <tr> <td style="height: 30px;"> </td> <td style="height: 30px;"> </td> </tr> </table>	DATE SUBMITTED	DATE DUE				
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Name: _____ Title 1: _____ Title 2: _____ Title 3: _____ Department: _____ Department Location: _____ Address: _____ Mail Code: _____ City: _____ State: _____ Zip: _____ Telephone: () _____ Fax: () _____ Cell Phone: () _____ Pager: () _____ Email : _____ Department URL: _____	<table style="width:100%;"> <tr> <td style="width:30%;">Quantity:</td> <td style="width:20%; text-align:center;">250</td> <td style="width:20%; text-align:center;">500</td> <td style="width:30%; text-align:center;">1000</td> </tr> </table> <div style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p style="text-align:center; font-size: 1.2em; font-weight: bold; color: #005596;">UC San Diego</p> <table style="width:100%; font-size: 0.8em;"> <tr> <td style="width:70%;"> Name Title Department Department Department </td> <td style="width:30%; text-align:right; vertical-align: top;"> Tel: (000) 000-0000 Fax: (000) 000-0000 Cell: (000) 000-0000 email@ucsd.edu url.ucsd.edu </td> </tr> </table> <p style="font-size: 0.8em; margin-top: 5px;"> University of California San Diego 9500 Gilman Drive # 0000 La Jolla, CA 92093-0000 </p> </div> <div style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p>Additional Information:</p> <div style="height: 150px; border: 1px solid black;"></div> </div>	Quantity:	250	500	1000	Name Title Department Department Department	Tel: (000) 000-0000 Fax: (000) 000-0000 Cell: (000) 000-0000 email@ucsd.edu url.ucsd.edu
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