



UC SANTA BARBARA Chemistry and Biochemistry

Copy Request Form

***All copy requests must be made 48 hours in advance**

1. Course # _____

2. Instructor Name _____

3. Contact Phone # _____

4. Contact Email _____

5. If submitting copy request electronically, include name of file _____

All versions (Grand Total)	Version 1 (A):	Version 2 (B):	Version 3 (C):
-------------------------------	-------------------	-------------------	-------------------

6. Quantity Breakdown (by version)

All Versions (1 color for all)	Version 1 (A):	Version 2 (B):	Version 3 (C):
-----------------------------------	-------------------	-------------------	-------------------

7. Exam Paper Color Choice _____

8. Single OR Double sided
(Entire exam will be printed this way,
NO EXCEPTIONS)

Single sided: Double Sided:

9. Total Number of Exam Pages (It is
HIGHLY RECCOMENDED to number your
own pages, digital copy required for us
to number for you)

Total Number of Pages: _____

10. Staple Yes No

11. Required Due date and time Date: Time:

Please Deliver Copies to:
UCSB/Department of Chemistry and
Biochemistry Building 232
Delivery Hours: Monday-Friday 9-12 & 1-4

Bill's Copy Shop Information:
Hours: M-F / 7:30AM - 5:30PM
Email: orders@billscopyshop.com
Phone: (805) 564 - 4353
Address: 1536 State St.