

RICOH COPIER REQUEST FORM

INSTRUCTIONS: EMAIL COMPLETED FORM TO SERVICE@KENNESAW.EDU

INSTALL LOCATION

KENNESAW CAMPUS:

MARIETTA CAMPUS:

DEPARTMENT: _____

BUILDING #: _____ ROOM #: _____

DEPT CONTACT: _____ PHONE: _____

EMAIL ADDRESS: _____ REQUESTED DATE: _____

COMMENTS: _____

REQUIREMENTS

B/W
COLOR
11" X 17" CAPABLE
HEAVY WEIGHT PAPER

STAPLE
HOLE PUNCH
FAX
OTHER

CURRENT COPIER INFO.
MAKE:
MODEL:

CURRENT MONTHLY VOLUME	
B/W?	
COLOR?	

HOW MANY PAPER DRAWERS DOES YOUR CURRENT MODEL HAVE? _____

COMMENTS: _____

COPY SERVICES / CAMPUS SERVICES STAFF ONLY

SUGGESTED RICOH MODEL:

WILL THIS BE A DEPARTMENTAL OR STUDENT PRINTER?

DEPT

STUDENT

WILL NSI AUTOSTORE SCANNING BE INSTALLED ON THIS COPIER?

YES

NO

APPROVAL SIGNATURE

PRINTED NAME

DATE

RICOH STAFF ONLY

REQUEST RECEIVED DATE: _____ PROPOSED MODEL: _____

ACCESSORIES: _____

ORDER SENT TO KSU/SPSU: _____ ORDER REC'D BACK: _____ ESTIMATED DELIVERY: _____