

UCI Libraries
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Specialized Printing Service

KFS Departmental Recharge
Authorization Form

Please bring this completed form to the Science Library Check Out Desk when you pick up your print job. Print job(s) will not be released without a completed form.

Requestor Information

Date: _____

Department: _____

Fiscal Officer Name: _____

Phone Ext: _____ Email: _____

KFS Account #: _____

Optional: Project Code: _____ OrgRefID: _____

Authorization

I authorize _____ to print _____ poster(s)/3D

object(s) for a total of \$ _____.

_____ Fiscal Officer Signature

Internal Use

UCI Libraries Check Out Desk Use Only Print job(s) picked up: Staff Initials: _____ Date: _____
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UCI Libraries Business Office Use Only KFS Doc #: _____
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For questions, please contact Kim Bishop at x4-5647 or kbishop@uci.edu