

UCI Libraries Copy Services Specialized Printing Service

KFS Departmental Recharge Authorization Form

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

Date: _____

Department: _____

Fiscal Officer Name: _____

Phone Ext: _____ Email: _____

KFS Account #: _____

Optional: Project Code: _____ OrgRefID: _____

I authorize _____ to print _____ poster(s)/3D object(s) for a total of \$_____.

Fiscal Officer Signature

UCI Libraries Check Out Desk Use Only

Print job(s) picked up: Staff Initials: _____ Date: _____

UCI Libraries Business Office Use Only

KFS Doc # _____

For questions please contact Kim Bishop at x4-5647 or kbishop@uci.edu

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