

Self Inking Stamp Order Form

AUXILIARY ENTERPRISES - Campus Technology & Supply Store

Date Requested: _____

Date Needed: _____ Day: _____ Time: _____

Contact Name: _____

Department: _____

Address / Bldg / Rm #: _____

Phone #: _____

Email Address: _____

Speedtype #: _____

Business Manager or
Authorized Signature: _____



1901 Perdido / MEB • 2nd Floor • Room 2200
New Orleans, Louisiana 70112
phone (504) 568-2565 • fax (504) 568-4598
aegraphics@lsuhsc.edu • www.lsuhs.edu/administration/ae/dp.aspx

DELIVERY INFORMATION

- Customer will pick up
- Contact Info
- Other - specify directly below

Name: _____

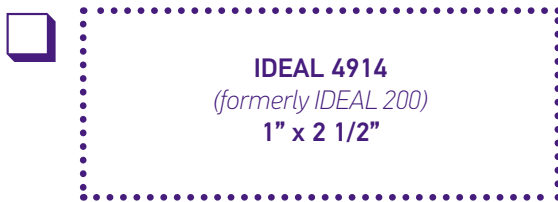
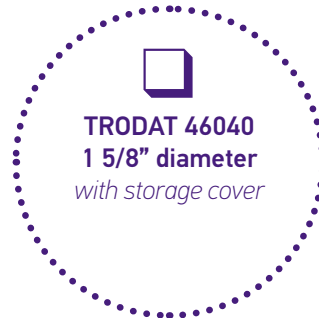
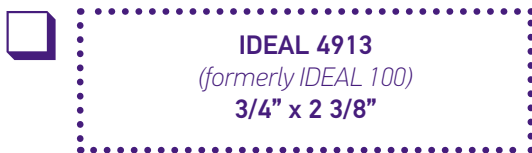
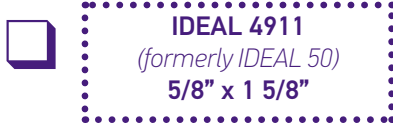
Address: _____

Bldg/Rm #: _____

Phone #: _____

STAMP INFORMATION

Please check your selection - All stamps are shown exact size.



INK COLORS AVAILABLE

Black Red
 Blue Green Purple



QUANTITY: _____

STAMP WORDING

EXTRA ITEMS

- Stamp Ink (6 cc)
- Stamp Ink (2 oz)
- Replacement Die
- Replacement Stamp Pad
- Signature Stamp

PROOF: (Check One)

- Exact Reprint. No proof necessary.
- Email: _____