Stationery Order Form

Office/Department Name (please choose leading statement and list how it is to appear on stationery):

☐ Office of __________________________________________________________

☐ Department of ____________________________________________________

Office/Department Phone: 217.245. ___ ___ ___ ___

The following address standards are used on all Illinois College stationery packages:
1101 West College Avenue
Jacksonville, Illinois 62650          www.ic.edu

Please order the following:

☐ Letterhead Quantity (in increments of 500) _____________

☐ Envelopes
  #10 Envelopes Quantity _________
  #9 Return Envelopes Quantity _________
  #9 Business Reply Envelopes Quantity _________
  6x9 Booklet Envelopes Quantity _________
  9x12 Large Envelopes Quantity _________
  Other __________________________ Quantity _________

Please charge the following departmental account to purchase stationery:
(Orders exceeding $1,000 require a purchase order.)

Account Number __________________________________________________________________________

Signature __________________________________________ Date _________________________________

Department Head Approval __________________________________________________________________

Forward completed form to:

Office of Marketing and Communication
232 Park Street