



State of California  
Prison Industry Authority




- CUSTOMER SUPPORT
- REPORT A PROBLEM
- CUSTOMER FEEDBACK
- EXEMPTION REQUEST

## OFFICIAL CDCR BUSINESS CARDS

**State of California**  
Department of Corrections and Rehabilitation

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**GARY WALKER**  
Superintendent I  
CALPIA Print Plant  
Hwy. 1 North / P.O. Box 8101  
San Luis Obispo, CA 93409  
T: 805.547.7900 Ext. 4677  
F: 805.547.7512  
E: gary.walker@calpia.ca.gov

**1A, 1 Color, Black, Coated Stock**

**State of California**  
Department of Corrections and Rehabilitation

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Superintendent I  
CALPIA Print Plant  
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San Luis Obispo, CA 93409  
T: 805.547.7900 Ext. 4677  
F: 805.547.7512  
E: gary.walker@calpia.ca.gov

**2A, 4 Color, Coated Stock**

**Quantity: (check box)**

500/BOX  
Item #: 145200.0500 - \$45.00

250/BOX  
Item #: 145200.0250 - \$35.00

100/BOX  
Item #: 145200.0100 - \$30.00

Type or print your business card information. Please print legibly to prevent errors of interpretation. Carefully check your information and sign this form below. NO proof copy will be sent.

I have checked my business card information and it is correct.

Signature: \_\_\_\_\_


For printing questions and to submit orders contact:

CMC/CALPIA Print Plant  
T: 805.547.7900 Ext. 4677  
F: 805.547.7512  
E: cmcprintplant@calpia.ca.gov

Use one (1) form per name.

**State of California**  
Department of Corrections and Rehabilitation

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**NAME**  
Title  
Department  
Street  
City, State, Zip  
T: \*\*\* \*\* \*  
F: \*\*\* \*\* \*  
E: \*\*\*@cdcr.ca.gov

Name:

Title:

Dept. / Inst:

Address:

City:

State / Zip:

Phone:

Fax:

Cell:  (Optional)

E-mail:  (Optional)

**Procurement Office Use Only**

Contact: \_\_\_\_\_  
Phone: \_\_\_\_\_

Please submit this form to CALPIA with a Std. 65.