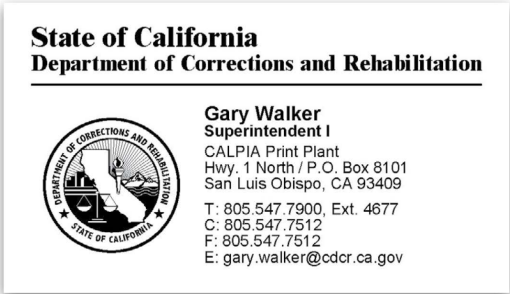
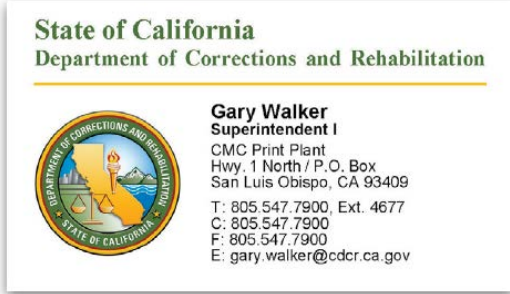


OFFICIAL CDCR BUSINESS CARD ORDER FORM



1A, 1 Color (Black), Coated Stock



2A, 4 Color, Coated Stock

Select quantity:

Box of 500 (\$45)
Item #: 145200.0500

Box of 250 (\$35)
Item #: 145200.0250

Box of 100 (\$30)
Item #: 145200.0100

Please fill in your business card information. Carefully check your information for accuracy. A proof will be sent via email for verification. **CALPIA will not print without approval.**
By signing, I have verified that the business card information below is correct.

Signature: _____

For questions contact:
Print.Services@calpia.ca.gov

Use one form per name

Submit this completed form along with a completed STD. 65 to:
customerservice@calpia.ca.gov

Name:

Title:

Dept. / Inst.



Address:

City:

State:

Zip Code:

Phone:

Ext.:

Fax:

Cell:

E-Mail:

Procurement Office Use Only:

Contact: _____

Phone: _____