Signage Request Form

One request per page unless multiples of same copy

note: lack of planning on your part does not constitute an emergency on my part!

Division:	Department
Requisitioner	Authorized Sig
Date requested	Needed by
Deliver to:	
Sizelettercolor prlegalblack arledgertext supA2color bo	nd white white background oplied graphics supplied
Font preferences (samples if they're not TT for Mac)	
Special Instructions	
(include sketch if words do not do justice for your vision)	
TEXT (please print neatly or type)	

Make 3 copies of this request. One for requisioner, one for dept. head, and send one to Terry Patch, Chicon Operations, P.O. Box 642057, Chicago IL 60664.