

COPIER SPECIFICATION INFORMATION

NAME _____

DEPARTMENT _____

To help you select appropriate copy machines for your department to evaluate, please complete the information requested below.

If any questions are not applicable to your situation, please indicate.

1. Do you want to rent*, purchase, or lease/purchase? _____

2. What is your monthly copy volume? _____

3. What is the make and model of the copy machine your are currently using?

4. How many copies per minute do you desire from new equipment?

5. Please check the accessories or features you require.

_____ Automatic document feeder

_____ Automatic duplex unit

_____ Sorter/Collator

_____ Reduction/Enlargement

_____ Large capacity tray or cassette

_____ Automatic Finisher

_____ Color Capability

_____ Network Capability

_____ Other _____

*If rental is desired, contact Purchasing Office for details (Phone 351-2287).

Once your department has completed the evaluation of at least three different copiers and filled out the standard evaluation form, return the forms to Purchasing with an appropriately completed Purchase Requisition. A Purchase Order to the vendor will be created.