



CHARGE ORDER FORM

This form was created by Shasta Builders' Exchange and is for SBE use only

Plan Copies

1st Job Number: Job Name:

Pages Requested: / / / / / /

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2nd Job Number: Job Name:

Pages Requested: / / / / / /

/ / / / / / /

3rd Job Number: Job Name:

Pages Requested: / / / / / /

/ / / / / / /

Charge Items

Quantity	Description	Unit Price	Total
	Standard Blueprint	2.00	
	11 x 17 Blueprint	1.00	
	8½ x 11 Photocopy	.15	
	11 x 17 Photocopy	.25	

Billing (Minimum Charge is \$2.00)

Company Name (Please Print): _____ Phone: _____

Received By (Please Print): _____ Date: _____

Special Instructions: _____

SBE Staff Use Only

Completed by: _____ Date: _____ Distributed by: _____ Date: _____