

DESIGN & MARKETING WORK REQUEST

Submitted by: Date Submitted:

Supervisor name: Supervisor approved (if necessary): ☐

Cost centre/s: Account:

Date of event (please allow at least a week before an event if possible):

Purpose (what are the primary goals of this product/design/event/update?)

Design product:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Quantity: <input type="text"/>	Quantity: <input type="text"/>	Quantity: <input type="text"/>	Quantity: <input type="text"/>

Other (please note there is a separate form for business cards):

Draft text/information:

Files will be emailed: ☐

Graphics (logos, photos etc) will be emailed: ☐

Please fill out form, save and send pdf to design@anglicare.com.au

