Office In A Box Worksheet

Complete all appropriate fields below and send to **Print_On_Demand@schneider-electric.com.**

YOUR NAME: _____

PHONE: _____

E-MAIL: _____

ITEMS NEEDED BY: (allow 3 weeks for delivery) _____

SELECT YOUR PACKAGE:

- **Small Office**
- **Medium Office**
- **Large Office**
- **Small Factory**
- **Medium Factory**
- **Large Factory**

WALL COLORS: (needed for vinyl lettering color selection)

Lobby / Entrance Area

SE Logo Wall: _____

Essence Statement Wall: _____

Conference Room – – Provide Two for Large Office and Large Factory Packages

Canvas / Decal Wall 1: _____

Canvas / Decal Wall 2: _____

Huddle Rooms – Provide Two for Medium Offices. Four for Large Offices.

1.) _____ **2.)** _____

3.) _____ **4.)**_____

POSTER SELECTIONS: (Small Office or Factory – Provide Four. Medium and Large Office or Factory – Provide Six.)

Provide the image # of the poster you select from the Stock Asset Guide located HERE.

Link to Stock Asset Guide as well as the entire Schneider Asset Library is in the Resources section of SchneiderPrintOnDemand.com

1.) _____ **2.)** _____ **3.)** _____

4.) _____ **5.)** _____ **6.)** _____

CANVAS SELECTIONS: (Small Office or Factory – Provide Four. Medium Office or Factory – Provide Six. Large Office or Factory – Provide Ten)

Provide the image # of the poster you select from the Stock Asset Guide located HERE.

Link to Stock Asset Guide as well as the entire Schneider Asset Library is in the Resources section of SchneiderPrintOnDemand.com

1.)_____ **2.)** _____ **3.)** _____

4.) _____ **5.)** _____ **6.)** _____

RACK BANNERS: (Medium Factory – Provide Four. Large Factory – Provide Ten.)

Provide the text that needs to go on each banner. Proof will be provided prior to production.

1.)_____ **2.)** _____ **3.)** _____

4.) _____ **5.)** _____ **6.)** _____

7.) _____ **8.)** _____ **9.)** _____

10.) _____

HUDDLE ROOM QUOTES: (Medium Office – Provide Two. Large Office – Provide Four.)

Quote should focus on local history / facts. Proof will be provided prior to production.

1.) _____

_____

2.) _____

_____

3.) _____

_____

4.) _____

_____

DELIVERY INFORMATION:

DELIVERY ADDRESS (NO PO BOXES) : _____

_____

SHIP TO THE ATTENTION OF: _____

PHONE NUMBER OF RECIPIENT: _____

PAYMENT INFORMATION:

If you need help completing these blanks, contact your teams Finance Support Team for the info you need.

GLOBAL COST CENTER: _____

ENTITY CODE: _____

For assistance with any part of this form, contact John Key – John.Key@SE.com