

FOR CU\*ANSWERS USE ONLY: Configured by:\_



Date

Rev. May 9, 2014

To request the creation of a new laser printer device in CU\*BASE, please complete this worksheet and fax it to CU\*Answers, Attn: Network Services, fax# 616-285-7288, or attach it to an email to <a href="helpdesk@cuanswers.com">helpdesk@cuanswers.com</a>. A Support Specialist will contact you to verify authorization and assist you with completion of the new device configuration. If you have questions about the process or need assistance filling out the worksheet, please contact a Systems Associate at 800-327-3478, Option 3, Communications and Hardware. We will be happy to assist you.

Credit Union Name		CU#	
Requested date for completion			
General Information			
This CU uses a			
If 5-character scheme:  Requested			
If 7-character sca Reques Device	ted The first two chara	ur branch #, an n <u>ust</u> b <u>e u</u> ni <u>que</u>	
For either scheme:			
Device Descrip	ion		
(Such as "Teller Check Printer," "Loan Forms Printer", "Drive-Thru Receipts Printer," etc.)			
Brand	h #		
Printer Make and Mo	del Duplex	x ☐ Yes ☐	] No
Primary Purpose			
Printer Drawers/Tray			
Check all of the drawers that your printer has, and specify how each drawer will be used.			
<u>Drawer</u> <u>How it will be used</u> (such as drawer 1 for starter checks, drawer 2 for laser checks, etc.)			
☐ Manual feed tray			
☐ Drawer 1			
☐ Drawer 2			
Authorization			
Authorized by		Date	
		- <u>-</u>	