

YOUR INFORMATION

Company _____

Date _____

Address _____

Phone _____

City, State, Zip _____

Contact _____

Printing Specifications

Job Name _____

P.O. _____

Quote # _____

PRINT & COLOR

DIGITAL 4/0 4/1 4/4 1/0 1/1 (4 = CMYK, 1 = BLACK)

OFFSET - flat OFFSET - thermo

BLACK PROCESS BLUE REFLEX BLUE RED GREEN

GRAY BORDEAUX BROWN TEAL GOLD PMS _____

EMBOSS

FOIL COLOR _____

FINISHED QUANTITY: _____

FINISHED SIZE: _____

STOCK: _____

ARTWORK

PRINTABLE ART SUPPLIED: YES NO

ARTWORK CORRECTIONS/ADJUSTMENTS: YES NO

ART SERVICE NEEDED: _____

Digital Proof Yes No

Press proof will be on same stock your job will print on.

PDF Proof Yes No

Proof will be emailed to you.

BINDERY / FINISHING

TRIM TO FINAL SIZE RETURN SHEETS FLAT (Uncut / No cutting charge)

SCORE

COLLATE

SADDLESTITCH

STAPLE

PERF

HOLE PUNCH

CORNER ROUND

COMB BIND

PAD _____/pad

SHRINK-WRAP _____/pkg

UV COAT: One Side Two Sides

FOLD: Single Letter "Z" Gate Double Gate

Gloss Satin Matte

SPECIAL INSTRUCTIONS

DELIVERY INSTRUCTIONS

WILL CALL

RETURN TO VENDOR

UPS DROP SHIP TO CUSTOMER
 (Indicate address below)

SELECT TASK

EMAIL
Please attach art

PRINT

SAVE

CONVERT TO ORDER

RETURN TO WEB SITE