

Print Order Worksheet

Job Name: _____

Sample Provided: _____

Product/Item

Please check only ONE item per order form.

- Letterhead
- Form (NCR) Pts: _____
- Envelope
- Catalog / Brochure / Flyer
- Business / Post / Rack Card
- Other: _____

Custom Finishing

- Fold To: _____
- Score
- Perforate
- Number: Red Black
- Stitch: Single Saddle
- Hole Punch: 2 3 Custom: _____
- Spiral Bind
- Glue
- Other: _____

Proof Option

- Deliver Hard Copy
- E-Mail PDF to: _____
- Other: _____

Special Instructions

Quantity: _____

Job Description

Size: _____

Stock Type: Text Cover Other: _____

Weight: _____ **Color:** _____

Ink(s)

- Full Color (CMYK)
- Black PMS Color(s): _____
- Single Sided Duplex (Two Sided)
- Bleeds
- Other: _____

Files Provided

File/folder Name: _____

- Digital PC MAC
- Hard copy
- Reorder # _____
- Other: _____

NOTES:

Pricing and turnaround assume that digital artwork is provided print-ready with no work required.

All documents should be one-up and correctly sized, bleeds extended, and process/spot colors designated.

Please include linked graphics and fonts. PC and Mac acceptable file types are: PDF, EPS, InDesign, Illustrator, Photoshop.

Graphics should be created and saved at a minimum resolution of 300 dpi for photographs, or 1200 dpi for rasterized line art or type to obtain the best results. Lower resolution will result in lower quality.

RGB artwork will need to be converted to CMYK, which may cause variations in color.



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Quote Request

Name: _____ Date: _____ Purchase Order: _____
 Company: _____ Email: _____
 Street: _____ Phone Number: _____ Fax Number: _____
 City: _____ Zip Code: _____

Bill to (Check here __ if same as above.)	Name: _____
Street: _____	Email: _____
City: _____ Zip Code: _____	Phone Number: _____ Fax Number: _____

Ship to (Same as top address __ Bill to __ above.)
 Name: _____
 Street: _____ Email: _____
 City: _____ Zip Code: _____ Phone Number: _____ Fax Number: _____

Item Code	Description	Size/Color	Line Price	Qty	Line Total

See attached Worksheet for order details.

By signing below, I am certifying that I am an authorized purchasing agent for the above named company.

Authorized Signature: _____

Subtotal	
Sales Tax 8.6%	
Freight	
Total	

Please sign and fax completed Quote Request to 602-272-1007