



# 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**

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**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:**

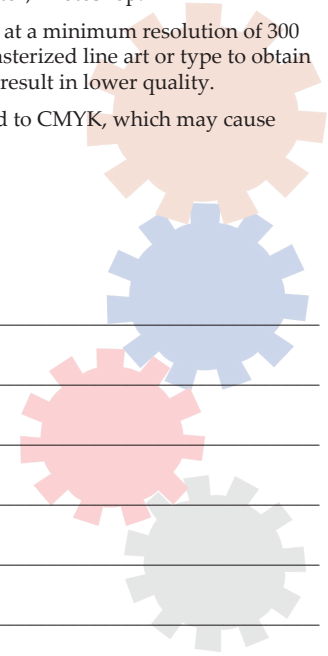
Pricing and turnaround assume that digital artwork is provided print-ready with no work required.

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.



# 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 completed Quote Request  
and email to sales@aci.az.gov*