

THIS ORDER IS NEW REPEAT REPEAT WITH CHANGES # _____ DATE _____

PLEASE COMPLETE ORDER FORM ACCURATELY & CLEARLY		THERMOGRAPHY ORDER FORM	
QUANTITY		STOCK	
1	2	DEALER _____	
ITEM		INK COLOR	
<input type="checkbox"/> BUSINESS CARDS 3 <input type="checkbox"/> LETTERHEADS * <input type="checkbox"/> ENVELOPES * <input type="checkbox"/> NCR FORMS <input type="checkbox"/> FLYERS <input type="checkbox"/> FOLD-R-CARD® FULL SHORT FOLD _____ FOLD _____ <input type="checkbox"/> ANNOUNCEMENT # _____ <input type="checkbox"/> OTHER _____	<input type="checkbox"/> BLACK 4 <input type="checkbox"/> RED <input type="checkbox"/> REFLEX BLUE <input type="checkbox"/> PROCESS BLUE <input type="checkbox"/> GREEN <input type="checkbox"/> BROWN <input type="checkbox"/> BURGUNDY <input type="checkbox"/> BORDEAUX RED <input type="checkbox"/> TEAL <input type="checkbox"/> GRAY <input type="checkbox"/> GOLD <input type="checkbox"/> SILVER <input type="checkbox"/> PMS _____ <input type="checkbox"/> PMS _____	ADDRESS _____	
		CITY _____	
		PHONE _____	
		ACCT. ID _____	P.O. # _____ (If Required)
CARD SPECIFICATIONS			
MAINLINE _____		BODY COPY _____	
TYPESTYLE _____		TYPESTYLE _____	
If necessary, type will be matched with closest typestyle.			
LOGO			
<input type="checkbox"/> LOGO FROM CATALOG		<input type="checkbox"/> CUSTOMER SUPPLIED LOGO	
		<input type="checkbox"/> ART ATTACHED	
LOGO # _____		<input type="checkbox"/> RETURN ART	

SPECIAL INSTRUCTIONS AND CUSTOM SERVICES			
<input type="checkbox"/> NUMBERING	START # _____ <input type="checkbox"/> RED	END # _____ <input type="checkbox"/> BLACK	FRONT: <input type="checkbox"/> RAISED <input type="checkbox"/> FLAT
			<input type="checkbox"/> LASER SAFE
			BACK: <input type="checkbox"/> RAISED <input type="checkbox"/> FLAT
			<input type="checkbox"/> PROOF

8	INDICATE MAINLINE WITH ARROW	1. Print copy clearly on lines below in proper sequence and in approximate position each line is to appear 2. Indicate MAINLINE or largest type line with an (→) in left column. 3. If TWO (or more) INK COLORS are used mark color of each line in column at right. 4. Attach previously printed sample if possible and mark changes wanted. 5. Body copy is 8 pt. medium Helvetica (see catalog type) unless otherwise specified.	INDICATE COLOR

CUSTOMER APPROVAL _____	SALESPERSON _____	DATE _____
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