



Job # _____

PO # _____

Date / /



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 Oyster Bay, New York 11771
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 Fax: 516.624.7629
 e-mail: sales@arcotype.com
 website: www.arcotype.com

Company _____ Attn: _____
 Address _____ Floor/ Suite _____
 City _____ State _____ Zip _____
 Telephone () _____
 Fax () _____
 Evening Phone () _____ (Call Until) _____

SYSTEM: Mac IBM PDF EPS
 SERVICE Standard (24 Hours) Rush (6 Hour/50% Premium) Priority (3 Hour/100% Premium)
 NEED OUTPUT BY (date and time) _____ (RUSH and PRIORITY based on 8:30AM to 6:00PM)
 SHIPPING Messenger RUSH Messenger CPU Call When Ready # _____
 Federal Express: Account # _____

FILM/PAPER		PAGE SET-UP										PROOFS										
File Name	Page No.s to Output	Negative	Positive	RRED	RREU	Spreads	Size	% to Print	Line	Screen	Yellow	Magenta	Cyan	Black	PMS	Colors	Matchprint	Color Key	Blue Print	Contact Prt	Rainbow	
1.																						
2.																						
3.																						
4.																						
5.																						

SCANS						SPECIAL INSTRUCTIONS
Scan Name	Color Sep/ Halftone	Size in Percent	Final Size	Resolution		
1.						
2.						
3.						
4.						
5.						

POSTERS				SPECIAL INSTRUCTIONS
File Name	Size in Percent	Final Size		
1.				
2.				
3.				
4.				

DID YOU REMEMBER TO:
 Include Proof Include all support files Sign/Date Form
 Fill in Time/Date needed Include all fonts

Signature _____