Date:PO#:	
Company:	
Contact:	
Shipping Address:	4 ¹ QUARTER
Dity: State: Zip:	
Phone: (Fax: ()	Send In Completed Order Form an
	New Imprint Artwork By This Date
Email Address:	
ORDER INFORMATION	2 PRICE VERSION
	Please select one:
otal Quantity (Min 500, Multiples of 100), 39¢ ea. plus shipping	Version A/W
<u>Q4'09</u>	Version
Order Qty:	Lined Out List Price
Mailing Qty*:	Custom**(extra charge)
Fotal shipped to Dealer: Drder Deadline: 8/6/09	**Custom-pricing file will be sent to you via email. You will
as a CVS or text (tab or comma-delimited) file. Email your list to <u>tcraig@opm</u> bieces will be delivered to the post office the week of the 20 th prior to the star inless otherwise noted in the special handling instructions below.	
<u>IMPRINT INFO</u>	<u>RMATION</u>
Back Cover Imprint ONLY - 2 1/4" x 8 1/4" Rectangular Are	
New artwork* to be sent to OPMA (\$45 charge)	
Changes needed: faxed with order (\$45 charge) Use artwork already on file with OPMA, AS IS	
Imprint plate charge \$16.00 (each guarter); Imprint Run Charge: \$24.00	- OnlyOT
*300 dpi EPS or TIFF files only; we cannot accept Microsoft Word, Micr JPEGS, or GIF files.	
Proofing Policy: An order confirmation and imprint proc You must sign and fax back all pages of Special Handling Instructions:	
<u> PLACE YOUR ORDER</u> – Send Orders, A	Artwork, and Direct Mail Information To:
Office Products Marketi	•
Attn: Tami Craig — <u>tcr</u> 4211 North Division, Comst	•
	● FAX (616) 785-6070
• PNONE (616) 785-6061 X.54 MA is not responsible for incorrect art if notification is not received in this department prior	