DIGITAL PRINTING WORK ORDER FORM

ambient **graphics**
Incorporated

Job No. _____ Date _____

P.O. No. _____ Date/Time Due_____

Job Description_____

n 48 Hours

n 24 Hours.
   (25% upcharge)

n Same day.
   (Call for pricing)

SHIP TO :

Company _____

Address _____

City _____ State ____ Zip _____

Attn. _____

Phone _____

BILL TO:

Company _____

Address _____

City _____ State ____ Zip _____

Billing Contact _____

Phone _____

After Hours Phone # (_____) _____

DIGITAL PRINTING APPLICATION

brochures

business cards

catalogs

flyers

newsletters

manuals

product sheets

cd covers

postcards

real estate

trade show

materials

pop displays

packaging

posters

report covers

conference programs

restaurant menus

personalization

variable data

PRESS PROOF REQUIRED n Yes n No

FILE NAME	PAGE SIZE	SIDES			QUANTITIES
		4/0	4/1	4/4	
Software & Version_____	Bleeds n Yes n No				
Software & Version_____	Bleeds n Yes n No				

PAPER	
80#	100#
Dull Book n	Dull Book n
Dull Cover n	Dull Cover n
Gloss Book n	Gloss Book n
Gloss Cover n	Gloss Cover n
Card Stock n	
Label Adhesive n	
other_____	

BINDERY _____

n **Trimming**   n **Scoring**   n **Folding**

Other Available Services

n **Drilling**   n **Perfing**
n **Saddlestiching**   n **Lamination**
n **Wire O Binding**   n **Other**
n **Comb Binding**   _____

n **Single Fold**   n **Z- Fold**   n **Tri-Fold (letter fold)**   n **Double Parallel-fold**

Special Instructions: _____

_____

PRESS PROOF REQUIRED n Yes n No

FILE NAME	PAGE SIZE	SIDES			QUANTITIES
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Special Instructions: _____

_____

* Please include a laser print of each page of your file. If you are using fonts other than Adobe, please include them.