		DIGITAL PROC	CESS ORDER FORM		
D 42	STOCK	QUANTITY	DEALER NAME		ACCT.#
	pt. C2S		ADDRESS		
	pt. C2S  10 pt. C2S	PRINT PROCESS	CITY,STATE,ZIP		
	# White				
	ITEM	UV COATING	PHONE	FAX	
□ BUSINESS CARDS □ 2 SIDED BUSINESS CARDS □ POSTCARDS □ BROCHURE □ LETTERHEADS □ ENVELOPES COMMERCIAL ENVELOPES AVAILABLE IN WHITE ONLY □ #6 3/4 □ #9 □ #10 □ WINDOW #10 ONLY CATALOG ENVELOPES		☐ FRONT ONLY ☐ BACK ONLY	PURCHASE ORDER	EMAIL ADDRESS	
		BOTH SIDES	SHIPPING INFORMATION	□BCT Route □Pick Up	□Drop Ship
		FOLDING	SHIP TO		☐UPS Ground
		SINGLE	ADDRESS		☐Next Day Air
		DOUBLE	ADDRESS		□2nd Day Air
					☐ Local Courier
			BCT Payment by Credit Card Card Holder Name	□American Express □Visa □	MasterCard
		□ BROCHURE	Card Number	Expiration	
□ 6X9 □ 9X12 □ 10X13		☐ ACCORDIAN	Signature		
SPECIAL INSTRUCTIONS					
INDICATE	TYPE STYLES	LAYOUT/GRAPHICS	SUPPLIED ART	PROOF REQUIRED	
MAINLINE WITH		Artchive # Design Idea	Disc Attached*  Email Sent*	☐ Fax Copy ☐ Email pdf Please note fax number or email	
ARROW		Logo	*Please note File Name & Format in Special Instructions Box	address in dealer info area above	
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
1. Print copy clearly above in proper sequence and in approximate position.  3. Attach previously printed sample if possible and mark changes wanted.					
2. Indicate MAINLINE or largest type line with an (→) in left column. 4. All copy will be set in Helvetica Medium unless otherwise specified. (Mainline Caps 12pt. Body Copy 8pt. U/L Proper Names in Caps)					
DATE				BCT USE	
CUSTOMER			Order Number	ſ	
APPROVAL ATTACH SA		MPLE CARD HERE			
SALESPERSO	N	,	or incorrect information off		
DEPOSIT		of the sample card. In the space provided above enter only the changes or additions in their correct position.			
DEI 0311					
		COIN	See position.		

WE RETAIN CUSTOMER ORDER FORMS FOR 30 DAYS