

1 CONTACT

CONTACT NAME		
COMPANY		
DAY PHONE NUMBER		
NIGHT PHONE NUMBER	HOW LATE MAY WE CALL?	
STREET ADDRESS		
CITY	STATE	ZIP CODE

2 SHIPPING

SHIPPING CONTACT NAME	<input type="checkbox"/> CHECK IF SAME AS JOB CONTACT
COMPANY	PHONE
STREET ADDRESS	
CITY	STATE ZIP CODE
<input type="checkbox"/> COURIER <input type="checkbox"/> HOLD FOR PICK-UP AT SPIRE Express <input type="checkbox"/> OVERNIGHT <input type="checkbox"/> US MAIL <input type="checkbox"/> USE MY SHIPPING ACCOUNT NUMBER: _____ WITH CARRIER: _____	

3 BILLING

P.O. NUMBER	
SPIRE Express ACCOUNT NUMBER <input type="checkbox"/> COD	
MC/VISA/AMEX NUMBER & EXP. DATE	
QUOTE REFERENCE	
TODAY'S DATE	DATE/TIME DUE
TURNAROUND (SEE REVERSE FOR DETAILS)	
<input type="checkbox"/> STANDARD <input type="checkbox"/> PRIORITY <input type="checkbox"/> FIRST PRIORITY	

4 FILE INFORMATION (use one column per file)

FILE NAME	FILE NAME	FILE NAME
APPLICATION/VERSION <input type="checkbox"/> MAC <input type="checkbox"/> WINDOWS	APPLICATION/VERSION <input type="checkbox"/> MAC <input type="checkbox"/> WINDOWS	APPLICATION/VERSION <input type="checkbox"/> MAC <input type="checkbox"/> WINDOWS
NUMBER OF PAGES	NUMBER OF COPIES EACH	NUMBER OF PAGES
NUMBER OF PAGES	NUMBER OF COPIES EACH	NUMBER OF PAGES
PAGE RANGE: from _____ to _____	LASER PROOFS: <input type="checkbox"/> INCLUDED	PAGE RANGE: from _____ to _____
PAGE RANGE: from _____ to _____	LASER PROOFS: <input type="checkbox"/> INCLUDED	PAGE RANGE: from _____ to _____
TYPEFACES AND FOUNDRY USED <input type="checkbox"/> Fonts are supplied	TYPEFACES AND FOUNDRY USED <input type="checkbox"/> Fonts are supplied	TYPEFACES AND FOUNDRY USED <input type="checkbox"/> Fonts are supplied
SUPPORT FILES (TIFF, EPS, PICT, etc.) <input type="checkbox"/> INCLUDED <input type="checkbox"/> NOT INCLUDED (FPO) <input type="checkbox"/> LINK TO SPX SCANS	SUPPORT FILES (TIFF, EPS, PICT, etc.) <input type="checkbox"/> INCLUDED <input type="checkbox"/> NOT INCLUDED (FPO) <input type="checkbox"/> LINK TO SPX SCANS	SUPPORT FILES (TIFF, EPS, PICT, etc.) <input type="checkbox"/> INCLUDED <input type="checkbox"/> NOT INCLUDED (FPO) <input type="checkbox"/> LINK TO SPX SCANS
METHOD OF TRANSMISSION <input type="checkbox"/> EMAIL <input type="checkbox"/> INTERNET: ftp	METHOD OF TRANSMISSION <input type="checkbox"/> EMAIL <input type="checkbox"/> INTERNET: ftp	METHOD OF TRANSMISSION <input type="checkbox"/> EMAIL <input type="checkbox"/> INTERNET: ftp
UPLOAD NAME: _____	UPLOAD NAME: _____	UPLOAD NAME: _____

5 PRINTING INSTRUCTIONS (use one column only)

Use a separate form for each type of output. Please check your output; we can not assume responsibility for any cost incurred using our output. Please send backup disks only, not originals.

INDICATE HERE IF SPECIAL INSTRUCTIONS ARE INCLUDED ON THE REVERSE SIDE OF THIS FORM.

SPiRE Express use only.

initials

machine

printer

volume

Output type	IMAGESETTING	COLOR PRINTING		FILE CONVERSION
Media	<input type="checkbox"/> FILM: <input type="checkbox"/> POS. <input type="checkbox"/> NEG EMULSION: <input type="checkbox"/> UP <input type="checkbox"/> DOWN	CANON PRINTS:	IRIS PRINTS:	<input type="checkbox"/> TIFF-IT P-1 <input type="checkbox"/> POSTSCRIPT <input type="checkbox"/> PDF <input type="checkbox"/> PDF-X1A <input type="checkbox"/> OTHER <input type="checkbox"/> RES
Page Size	<input type="checkbox"/> LETTER <input type="checkbox"/> TABLOID <input type="checkbox"/> 15 X 21 <input type="checkbox"/> 25 X 38 <input type="checkbox"/> OTHER	<input type="checkbox"/> LETTER <input type="checkbox"/> TABLOID <input type="checkbox"/> 12" X 18"	<input type="checkbox"/> TABLOID (10.6" X 17.2")	
Separations/Stocks	<input type="checkbox"/> NONE <input type="checkbox"/> PROCESS <input type="checkbox"/> SPOT (list colors in special instructions) <input type="checkbox"/> OVERPRINT (list colors in special instructions) <input type="checkbox"/> KNOCKOUT (list colors in special instructions) <input type="checkbox"/> TRAP (turnaround by quote)	CANON STOCKS: <input type="checkbox"/> TEXT WT. <input type="checkbox"/> COVER	IRIS STOCKS: <input type="checkbox"/> GLOSS (default) <input type="checkbox"/> MATTE <input type="checkbox"/> SEMI-MATTE <input type="checkbox"/> TRANSPARENCY	
Options	<input type="checkbox"/> CROP/REGISTRATION MARKS <input type="checkbox"/> REDUCE/ENLARGE % <input type="checkbox"/> SCREEN RULING LPI <input type="checkbox"/> LINK TO SPX SCANS JOB #	<input type="checkbox"/> CROP/REGISTRATION MARKS <input type="checkbox"/> REDUCE/ENLARGE % <input type="checkbox"/> FIT TO PAGE <input type="checkbox"/> LINK TO SPX SCANS JOB #		
Proofing	<input type="checkbox"/> MATCHPRINT <input type="checkbox"/> CONTACT <input type="checkbox"/> DYLUX <input type="checkbox"/> KODAK APPROVAL <input type="checkbox"/> OTHER	LAMINATION <input type="checkbox"/> GLOSS <input type="checkbox"/> MATTE <input type="checkbox"/> OTHER	MOUNTING <input type="checkbox"/> FOAMCORE <input type="checkbox"/> GATORBOARD <input type="checkbox"/> OTHER	

