

DATE OF ORDER		QUOTE #	<input type="checkbox"/> RUSH SERVICE <input type="checkbox"/> NEW REORDER <input type="checkbox"/> EXACT REORDER <input type="checkbox"/> REORDER with changes <small>INCLUDE COPY WITH CHANGES</small>		<input type="checkbox"/> Please submit proof before processing my order <input type="checkbox"/> Please apply promo code _____ to my order <input type="checkbox"/> Please apply reseller discount (I will fax resale certificate)	
CONTACT PERSON		P.O. #				
CUSTOMER BILLING INFORMATION			CUSTOMER SHIPPING INFORMATION			
COMPANY NAME			COMPANY NAME			
STREET ADDRESS (REQUIRED FOR UPS SHIPMENT)			STREET ADDRESS (REQUIRED FOR UPS SHIPMENT)			
CITY, STATE AND ZIP			CITY, STATE AND ZIP			
PHONE NUMBER INCLUDING AREA CODE ()		FAX NUMBER INCLUDING AREA CODE ()		PHONE NUMBER INCLUDING AREA CODE ()		
SIGNATURE OF PURCHASER		EMAIL ADDRESS FOR CONFIRMATION AND INVOICE		SIGNATURE OF PURCHASER		
				EMAIL ADDRESS FOR CONFIRMATION AND INVOICE		

CUSTOM BUSINESS FORMS Ordering Information - For fastest service, please fill out completely or call with any questions						
QUANTITY	PRODUCT # (if known)	DESCRIPTION (include size of form and number of parts if applicable)	PAPER/CHECK COLOR	INK COLOR(S)	START CONSECUTIVE NUMBERING AT: (no numbering will be printed unless specified)	RETAIL PRICE
					<input type="checkbox"/> NO. _____ <input type="checkbox"/> Do Not Number	\$
					<input type="checkbox"/> NO. _____ <input type="checkbox"/> Do Not Number	\$
					<input type="checkbox"/> NO. _____ <input type="checkbox"/> Do Not Number	\$

STATIONERY or PHOTO BUSINESS CARD Ordering Information - Please send example or sketch of desired layout											
QUANTITY	PRODUCT # (if known)	PRODUCT	PAPER COLOR	PAPER TYPE (linen, laid...)	INK COLOR(S)		TYPESTYLE*	LAYOUT LETTER	PRINTING STYLE	FREE BUSINESS DESIGN NUMBER	RETAIL PRICE
					COLOR 1	COLOR 2					
		<input type="checkbox"/> Letterhead <input type="checkbox"/> Envelope <input type="checkbox"/> Business Card <input type="checkbox"/> with bleeds <input type="checkbox"/> with bleeds							<input type="checkbox"/> Flat <input type="checkbox"/> Raised		\$
		<input type="checkbox"/> Letterhead <input type="checkbox"/> Envelope <input type="checkbox"/> Business Card <input type="checkbox"/> with bleeds <input type="checkbox"/> with bleeds							<input type="checkbox"/> Flat <input type="checkbox"/> Raised		\$
		<input type="checkbox"/> Letterhead <input type="checkbox"/> Envelope <input type="checkbox"/> Business Card <input type="checkbox"/> with bleeds <input type="checkbox"/> with bleeds							<input type="checkbox"/> Flat <input type="checkbox"/> Raised		\$
		<input type="checkbox"/> Letterhead <input type="checkbox"/> Envelope <input type="checkbox"/> Business Card <input type="checkbox"/> with bleeds <input type="checkbox"/> with bleeds							<input type="checkbox"/> Flat <input type="checkbox"/> Raised		\$

* Default typestyle will be used if none is specified

SPECIAL INSTRUCTIONS

Please email camera-ready art to artwork@smartresolution.com or mail us your disk.
If we will be designing your product, please fax or email a detailed sketch.
Please be sure to mention a quote number, company name or contact person's name.

OUR GUARANTEE AND DELIVERY
GUARANTEE POLICY If you are not totally satisfied with any of our Custom Products - at any time and for any reason - we will refund the entire purchase price or replace it FREE! Regardless of fault.
FAST TURNAROUND Processing time on custom orders is six business days after final proof is approved. RUSH SERVICE is also available at an additional charge. RUSH ORDERS ship four business days after final proof is approved. If, for any reason, we are late shipping your order, we will not charge you for any shipping costs and/or will send a portion of your order next-day air or second-day air depending on where the order ships from.

OPTIONS	
ADDITIONAL INK COLOR(S) Please specify PMS # _____	\$
BACKPRINTING <input type="checkbox"/> Business cards <input type="checkbox"/> Carbonless forms - see below Please specify how many parts 1 2 3 4 5 (please circle)	\$
PERFORATING Please specify horizontal 1 2 vertical 1 2 (please circle)	\$
PLATE CHANGES (if parts do not print the same) Please specify how many 1 2 3 4 5 (please circle)	\$
GRAPHIC DESIGN CHARGE Please call for a quote	\$
NUMBERING Please specify red or black (circle) and starting # _____	\$
RUSH SERVICE Order ships 4 days after proof approval	\$
OTHER Please specify _____	\$
SHIPPING METHOD	
<input type="checkbox"/> Parcel Post	\$
<input type="checkbox"/> UPS Standard Ground (default) <input type="checkbox"/> FedEx Ground <input type="checkbox"/> UPS 2nd Day Air <input type="checkbox"/> FedEx 2nd Day Air <input type="checkbox"/> UPS Next Day Air <input type="checkbox"/> FedEx Overnight	\$
<input type="checkbox"/> Use my FedEx Account # _____	Billed to your account
TOTALING YOUR ORDER	
THANK YOU	SUBTOTAL (after any discounts) \$
FOR YOUR ORDER I	FLORIDA SALES TAX (ADD 6.5%) \$
Please fax or mail in your order or call with any questions.	SHIPPING (please refer to attached sheet) \$
	TOTAL \$
PAYMENT INFORMATION	
I WILL PAY BY <input type="checkbox"/> CHECK (please allow to clear before processing)	
<input type="checkbox"/> CREDIT CARD ON FILE	LAST 4 DIGITS _____
<input type="checkbox"/> NEW CREDIT CARD	<input type="checkbox"/> Please email me secure link for payment <input type="checkbox"/> Please call me when you process my order
<input type="checkbox"/> INVOICE (subject to prior credit approval)	