

POSTCARD ORDER FORM

NEXT DAY COLOR PRINTING, INC.
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| PLEASE CHECK A | LL APPROPRIATE BOXES - | JOBS CAN NOT | DE PROCESSED WI | INOUI INIS FORM | |
|-------------------------------|---|--------------------------------|--|---------------------------------------|--|
| CUSTOMER & SHI | PPING INFORMATION | | | | |
| Company name | | Ship to | Ship to | | |
| Contact | | Street | Street | | |
| Street | | City, State, Zip | | | |
| City, State, Zip | | Telephone | | | |
| Telephone () | Fax (| Attention | | | |
| DISK & PROOFIN | G | | | | |
| PLATFORM □ Mac □ PC | SOFTWARE | | CUSTOMER P | ROVIDED PROOFS | |
| SHIPPING | | | | | |
| | PING LABELS (DROP SHIP) er shipment, per location) - If printil | ng is to be shipped to a third | d party, Please include shippin | g labels completely filled out. | |
| JOB DESCRIPTION | | | | | |
| Qty Size | Stock | | Ink | | |
| | 12 pt. 2 Sides Coate | ed Gloss Cover | □ 4/0 □ 4/b (NO Aqueous cod | lack 🗆 4/4 iting on the back side) | |
| | | | | Price \$ | |
| PAYMENT METHO | D | | Shi | pping \$ | |
| Full payment is require | d with the order. | | 3rd | party \$ | |
| □ VISA* □ MasterCard | MATERIAL CONT | | CA sal | es tax \$ | |
| Credit card number 1 2 3 4 5 | 6 7 8 9 10 11 12 | 13 14 15 16 | Expiration date | Total \$ | |
| | | | | | |

Signature Date