Please Complete Order Form Accurately & Clearly

OFFSET Full Color Order Form

ACCT. #   P.O. #
                           (If Required)

DEALER

ADDRESS

CITY

PHONE   FAX

QUANTITY

ITEM

❏ BUSINESS CARD
  ❏ UV Coat 4 Color Side(s)
  ❏ NO UV Coating
❏ POST CARD/RACK CARD
  ❏ UV Coat 4 Color Side(s)
  ❏ NO UV Coating
  Size_____
❏ FLYER/CATALOG SHEET
  Size_____
❏ LETTERHEAD
❏ ENVELOPE
❏ OTHER _____

STOCK

❏ 14PT C2S Cover
❏ 100# Gloss Cover
❏ 100# Gloss Book/Text
❏ 70 # Premium Opaque
❏ Other
_____

INK COLOR

❏ 4/0 - 1 SIDED
❏ 4/1 or 4/4 - 2 SIDED

COLOR PROOF

❏ NO
❏ Yes - PDF (Add'l $) EM to
_____

ARTWORK / CHECKLIST

❏ PerfectSend Upload   PSA #_____
❏ Art Emailed (Add'l $)   File name_____
❏ Supplied Disk (Add'l $) File name_____

TYPESTYLES

Mainline _____   ❏ On Disk
Bodycopy _____   ❏ Match Close as Possible

SPECIAL INSTRUCTIONS AND CUSTOM SERVICES

| INDICATE MAINLINE IF BCT TYPESETS | 1. Attach hard copy of art sent by PerfectSend or E-mail below and fax completed order form to BCT.
2. If BCT is typesetting, clearly indicate desired copy and layout below.
3. Attach previously printed sample if possible and mark changes wanted.
4. Body copy is 8 pt. medium Helvetica (see catalog type) unless otherwise specified. | |

Attach Copy Here

BCT®

**23101 TERRA DRIVE
LAGUNA HILLS, CA
Phone: 949-859-0801
FAX: 949-830-6217
E-mail:
orders@bctlagunahills.com**

CUSTOMER
APPROVAL

SALESPERSON   DATE

WE RETAIN ORDER FORMS FOR ONLY 30 DAYS. ALL CLAIMS
OR CORRECTIONS MUST BE MADE WITHIN THIS PERIOD.

ROUTE

DATE   **6/08**

BCT USE ONLY

SCAN # _____

TYPESET#_____

PERFECTSEND#_____

RETURNEDART_____

PRESS _____