

Copyright Release

By submitting the job, you are stating that you are the owner and copyright holder of the images, text and anything within.

Digital Press Print Order

United Promotions, Inc.

433 Lawton Road P.O. Box 668268
Charlotte, NC 28216 Charlotte, NC 28266-8268
24 Hr. (704) 391-2992 Toll Free (800) 362-4441
Fax (704) 391-2902 www.upilab.com

Limit of Liability

Submitting any tangible or electronic media, image, data, file, card, disc, device, film, print, slide or negative for any purpose, such as processing, printing, duplication, alteration, enlargement, storage, transmission, or other handling, constitutes an **AGREEMENT** that any loss or damage to it by our company, subsidiary or agents, even though by our negligence or other fault, will only entitle you to replacement with an equivalent quantity/size of unexposed photographic film or electronic media, and processing of the replacement media. Except for such replacement, our acceptance of the media, image, data, file, card, disc, device, film, print, slide or negative is without other liability, and recovery for any incidental or consequential damages is excluded. No express or implied warranty is provided. We recommend that you keep a copy of the original files or store your film safely as we cannot guarantee the safe keeping of all files. United Promotions cannot be responsible for software you download or purchase to communicate with the lab.

CUSTOMER # _____ Telephone # () _____ Email _____ **LAB USE ONLY**

STUDIO NAME _____ JOB # _____

STREET _____ OJN # _____

CITY _____ STATE _____ ZIP _____ CUST # _____

SHIP TO: NAME _____ SHIP DATE _____

STREET _____ DATE PROOF SENT _____

CITY _____ STATE _____ ZIP _____

JOB IDENTIFICATION _____

DATE JOB SHOT _____ DATE JOB DUE TO SHOW _____

Shipping Methods

MAIL		UPS			BUS		FEDEX			PICKUP AT LAB
Postal Service	Next Day Air	Next Day Air Saver	2nd Day	3 Day Select	Ground		Priority One	Standard Overnight	Economy	Saver

PAYMENT INFORMATION
 Check COD Visa Mastercard Amex
 MO/ CK. # _____
 (Do Not Put Card # - Please call Accounting)
 Preppay Amount: _____

DIGITAL PRESS PRINTING

IMPORTANT: Filling out the digital press print order completely will aid in expediting the production of your order.

** See instructions on back of print order **

ORDER DESCRIPTION

(Please provide a brief description of your order. This is to help us correctly identify your order.)

QUANTITY: _____

Order being submitted via: UPress FTP email Fax Other
 Proof requested?: Hard Copy Proof Digital (PDF) Proof None Needed

BOOKS *(please fill out this section for book orders only)*

PAGE COUNT: _____ *(not including covers)*

BOOK SIZE:	BINDING STYLE:	COVER STOCK:	UV COATING:
<input type="radio"/> 8.5" x 11"	<input type="radio"/> Saddle-Stitched	<input type="radio"/> 100# Gloss	<input type="radio"/> No
<input type="radio"/> 5.5" x 8.5"	<input type="radio"/> Black Plastic Coil	<input type="radio"/> 100# Linen	<input type="radio"/> Yes
<input type="radio"/> Other	<input type="radio"/> Perfect Bind	<input type="radio"/> 100# Pearl	

CALENDARS *(please fill out this section for calendar orders only)* 24 Pages

BINDING STYLE: Saddle-Stitched Black Plastic Coil 28 Pages 32 Pages

FOLDED CARDS *(please fill out this section for folded card orders only)*

CARD SIZE:	CARD STOCK:	UV COATING:
<input type="radio"/> 5" x 7"	<input type="radio"/> 100# Gloss	<input type="radio"/> No
<input type="radio"/> Other	<input type="radio"/> 100# Linen	<input type="radio"/> Yes
	<input type="radio"/> 100# Pearl	

FLAT DUPLEX CARDS *(please fill out this section for flat duplex card orders only)*

CARD SIZE:	CARD STOCK:	UV COATING:
<input type="radio"/> 5" x 7"	<input type="radio"/> 100# Gloss	<input type="radio"/> No
<input type="radio"/> 6" x 9"	<input type="radio"/> 100# Linen	<input type="radio"/> Yes
<input type="radio"/> Other	<input type="radio"/> 100# Pearl	

PLEASE SEE REVERSE SIDE
for additional information or to include special instructions

2" x 3.5" BUSINESS CARDS

(please fill out this section for business card orders only)

CARD STOCK:	UV COATING:
<input type="radio"/> 100# Gloss	<input type="radio"/> No
<input type="radio"/> 100# Linen	<input type="radio"/> Yes
<input type="radio"/> 100# Pearl	

11" x 17" POSTERS

(please fill out this section for 11x17 poster orders only)

PAPER STOCK:	UV COATING:	2-SIDED:
<input type="radio"/> 100# Gloss	<input type="radio"/> No	<input type="radio"/> No
<input type="radio"/> 100# Linen	<input type="radio"/> Yes	<input type="radio"/> Yes
<input type="radio"/> 100# Pearl		

8.5" x 11" BROCHURES

(please fill out this section for brochure orders only)

STYLE:

Bi-Fold (4 - 5.5" x 8.5" panels)

Tri-Fold (6 - 3.6" x 8.5" panels)

ACCORDION CARDS

(please fill out this section for accordion card orders only)

CARD STOCK:	UV COATING:	SIZE
<input type="radio"/> 100# Gloss	<input type="radio"/> No	<input type="radio"/> 2 3/4 x 3 5/8 (6 Panels)
<input type="radio"/> 100# Linen	<input type="radio"/> Yes	
<input type="radio"/> 100# Pearl		<input type="radio"/> 4 1/4 x 5 1/2 (4 Panels)

BOOKMARKS

(please fill out this section for bookmark orders only)

CARD STOCK:	UV COATING:
<input type="radio"/> 100# Gloss	<input type="radio"/> No
<input type="radio"/> 100# Linen	<input type="radio"/> Yes
<input type="radio"/> 100# Pearl	

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CUSTOMER # _____ Telephone # (____) _____ Email _____
(Where you can be reached)

STUDIO NAME _____

STREET _____

CITY _____ STATE _____ ZIP _____

SHIP TO: NAME _____

STREET _____

CITY _____ STATE _____ ZIP _____

JOB IDENTIFICATION _____

DATE JOB SHOT _____ DATE JOB DUE TO SHOW _____

Shipping Instructions: (Please Check One)

MAIL		UPS				BUS	FEDEX				PICKUP AT LAB
Postal Service	Next Day Air	Next Day Air Saver	2nd Day	3 Day Select	Ground		Priority One	Standard Overnight	Economy	Saver	

# CDs	# Images	# Rolls	Film Size	Photographer

Estimated Sittings _____

Edit to _____ Pose(s)

Check here if package list is attached.

ID CARDS

Additional Information for ID Cards:

- | | |
|---------------------------------------|---------------------------------------|
| <input type="radio"/> School Name | <input type="radio"/> Home Phone |
| <input type="radio"/> School Year | <input type="radio"/> Emergency Phone |
| <input type="radio"/> Student Address | <input type="radio"/> Teacher Name |
| <input type="radio"/> Student ID | <input type="radio"/> Grade |
| <input type="radio"/> S.S. Number | <input type="radio"/> Homeroom |
| <input type="radio"/> Other _____ | |

School Name: _____

School Year: _____

Principal: _____

School Logo Included: Yes No

PACKAGES

Pkg. 1 _____

Pkg. 2 _____

Pkg. 3 _____

Pkg. 4 _____

Pkg. 5 _____

Pkg. 6 _____

Pkg. 7 _____

Pkg. 8 _____

Pkg. 9 _____

Pkg. 10 _____

Overlay Info:

GROUPS, BIG PRINTS & QUANTITY PRINTS

Please include text file or stats sheet and run sheets for proper identification. Limit text to 25 characters per line.

Size: _____

Group Border Options:

- | | |
|--|---------------------------------------|
| <input type="radio"/> Group Overlay | <input type="radio"/> With Logo |
| <input type="radio"/> Personalized Names | <input type="radio"/> Polished Copper |
| <input type="radio"/> Brushed Metal | <input type="radio"/> Marble |
| <input type="radio"/> Water | <input type="radio"/> Wood Grain |
| <input type="radio"/> Other _____ | |

Special Instructions:

Supplies Needed:

Rush! / Ship Now

Ship With This Order

LAB USE ONLY

JOB # _____

OJN # _____

CUST # _____

SHIP DATE _____

DATA BACKS _____

SITTING CARDS _____

PROOF(S) _____

ADDITIONAL SERVICES

- 3½ Buttons/Mirrors/Magnets
- Admission Tickets
- Bag Tags & Key Tags
- Banner Prints
- Big Prints
- Calendars
- Die Cut Wallets
- Digital Retouching
- Fun Packs
- Fun Posters
- Gold or Silver Foil Stamping
- Greeting Cards
- Groups
- Groupmates
- ID Cards
- Individual Photo Magnets
- Laminating
- License Plate
- Locker Prints
- Magazine Covers
- Memorymates
- Mouse Pads
- Mugs
- Pennants
- Photo Balls
- Photo Magnet Cutout
- Print Mounting
- Proof Booklets
- Puzzles
- Statuettes
- Sticker Prints
- T-Shirts
- Templates
- Texturing
- Trader Cards
- Laser Photo Image Etching
- Other: _____

PAYMENT INFORMATION

Check COD Visa Mastercard Amex
MO/ CK. # _____
(Do Not Put Card # - Please call Accounting)

Prepaid Amount: _____

Amount Received: _____
(By Lab)

Received By: _____

INSTRUCTIONS for completing a DIGITAL PRINT ORDER

For your personal records keep a copy of this and completed order forms. When you call to inquire about the production status of this job you will need your 4 digit customer #.

1. Fill out the customer information completely. Be sure to put your telephone number and email address where you can be reached for questions.
2. Fill out the Shipping Instructions that apply to your order.
3. Please completely fill out the number of CDs, Images, Rolls, Film size and photographers name.
4. Packages - Please write in detailed information about your package contents for your order. How many? What sizes? Etc...
5. Groups, Big Prints and Quantity Prints - Include a text file or stat sheet and run sheets for proper identification. Limit text to 27 characters per line. Please indicate the Print Size and Border options.
6. Please refer to the CD/DVD Order Form for a Yearbook or School Administrative CD for additional instructions.
7. ID Cards - Please fill this section out completely. If a logo is needed for the ID Card, please send a clear image via Email, CD or Floppy Disk. Please attach a layout design of the ID Card.
8. Additional Services - Check all additional services you would like for your order.
9. Special Instructions - Write or type any special instructions in this section. If there is not enough room, please attach a sheet with the order form.

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CD/DVD Print Order

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CUSTOMER # _____ Telephone # () _____ Email _____

LAB USE ONLY

STUDIO NAME _____ JOB # _____

STREET _____

CITY _____ STATE _____ ZIP _____

SHIP TO: NAME _____ CUST # _____

STREET _____

CITY _____ STATE _____ ZIP _____ SHIP DATE _____

JOB IDENTIFICATION _____ DATE PROOF SENT _____

DATE JOB SHOT _____ DATE JOB DUE TO SHOW _____

Shipping Methods

PAYMENT INFORMATION

MAIL		UPS				BUS	FEDEX				PICKUP AT LAB
Postal Service	Next Day Air	Next Day Air Saver	2nd Day	3 Day Select	Ground		Priority One	Standard Overnight	Economy	Saver	

Check COD Visa Mastercard Amex
MO/CK. #
(Do Not Put Card # - Please call Accounting)
Prepay Amount: _____

CD/DVD TYPES & OPTIONS

IMPORTANT: Filling out the CD/DVD print order completely will aid in expediting the production of your CD/DVD's.

** See instructions on back of print order **

TYPE OF SHOOT

First Shoot Retakes Staff Only

(CD/DVDs should be ordered after absentees have been shot and submitted)

CD/DVD LABEL

(Please print or type exact title)

SCHOOL NAME: _____

Yearbook Co. or Type of CD: _____ Your Company: _____

SCHOOL ADMINISTRATIVE CD/DVDs

School Image Software SSTS 2000
 SASI (For Mac) SASI XP
 Other: _____

Color B&W _____ QTY

Sort images and data on CD/DVD by:

Grade Homeroom
 Teacher Other

YEARBOOK CD/DVDs

Jostens Herff Jones
 Lifetouch (PMAI) Walsworth
 Other: _____

Color B&W _____ QTY

Sort images and data on CD/DVD by:

Grade Homeroom
 Teacher Other

IMAGE ONLY CD/DVDs

Hi Res Low Res

Color B&W

_____ QTY

Special Instructions: _____

INSTRUCTIONS for completing a CD/DVD PRINT ORDER

For your personal records keep a copy of this and completed order forms. When you call to inquire about the production status of this job you will need your 4 digit customer #.

1. Fill out this section completely.
 - 1a. List the school name on the Job Identification line.
 - 1b. Be sure to put your telephone number and email address where you can be reached for questions.
2. Circle which type of shoot you are sending.
3. Fill out the shipping instructions on your order.
4. Please indicate the type of CD-ROM you are needing for your school.
 - 4a. If the name of the CD company is not listed please write in the correct company on the Other line.
 - 4b. Fill in quantity amount and be sure to include for any additional copies.
 - 4c. Indicate if you want the images on CD/DVDs in Black & White or Color.
 - 4d. Specify the sorting of images and data by grade, teacher, homeroom or other for the CD/DVD.
5. Please let us know what you would like the label on the CD/DVD to display.
 - 5a. School Name or Yearbook Publisher's name.
 - 5b. Yearbook or CD type.
 - 5c. Your company name or a contact person at the school.
6. Please write any special instructions needed for this order. If there is not enough space, attach a separate sheet with the order form for further instructions.

Indexing Indexing is a way of linking personal data (names, ID numbers, grade, etc.) to image files. We encourage our customers to obtain a text file from the school that contains Student Names, Grade, Homeroom, Teacher/Staff and any other information you will need to complete the order. You may submit a comma separated text file or Excel file in shoot order. We will not accept hand written out of shoot order without prior approval from our Digital Dept. Send original shoot with absentees.

*EXAMPLE of an Excel file:

	A	B	C	D	E	F	G	H	I	J
1	ShootID	LastName	FirstName	Homeroom	Grade	Teacher				
2	1001	De Sota	John	B-206		6 Riley				
3	1002	Galley	Barbara	B-206		6 Riley				
4	1003	Deter	Jacob	B-206		6 Riley				
5	1004	Williams	Jason	B-206		6 Riley				
6	1005	Jacobson	Wilma	B-206		6 Riley				

- Additional fields:*
- School Name
 - School Year
 - Student Address
 - Barcode
 - Student ID
 - S.S. Number
 - Home Phone
 - Emergency Phone
 - * other

* Indicate the additional field of data needed on the Digital Work Order

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Composite Print Order

United Promotions, Inc.

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24 Hr. (704) 391-2992
Fax (704) 391-2902

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CUSTOMER # _____ Telephone # (____) _____ Email _____ **LAB USE ONLY**

STUDIO NAME _____ JOB # _____

STREET _____

CITY _____ STATE _____ ZIP _____ OJN # _____

SHIP TO: NAME _____ CUST # _____

STREET _____

CITY _____ STATE _____ ZIP _____ SHIP DATE _____

JOB IDENTIFICATION _____ DATE PROOF SENT _____

DATE JOB SHOT _____ DATE JOB DUE TO SHOW _____ / /

Shipping Methods

MAIL	UPS				BUS	FEDEX				PICKUP AT LAB
Postal Service	Next Day Air	Next Day Air Saver	2nd Day	3 Day Select	Ground	Priority One	Standard Overnight	Economy	Saver	

PAYMENT INFORMATION

Check COD Visa Mastercard Amex
MO/ CK. # _____
(Do Not Put Card # - Please call Accounting)
Preppay Amount: _____

COMPOSITES

IMPORTANT: Filling out the composite print order completely will aid in expediting the production of your composites.

* See instructions on back of print order *

COMPOSITE TITLE

(Please print below exactly what should appear in the title box or attach info to order form)

SCHOOL NAME: _____

City: _____ State: _____

Principal/Director: _____

Teacher(s): _____

Grade: _____ Year: _____

Size	Quantity
<input type="radio"/> 5x7	_____
<input type="radio"/> 8x10	_____
<input type="radio"/> 10x13	_____
<input type="radio"/> 11x14	_____
<input type="radio"/> 16x20	_____
<input type="radio"/> 20x30	_____
<input type="radio"/> Other: _____	_____

COMPOSITE LAYOUT & THEME

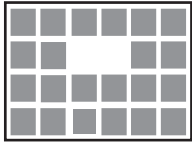
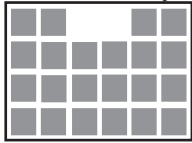
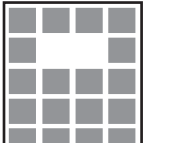
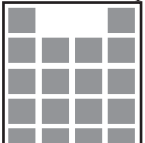
Title Block Center  Horizontal <input type="radio"/>	Title Block Top  Horizontal <input type="radio"/>	Title Block Center  Vertical <input type="radio"/>	Title Block Top  Vertical <input type="radio"/>
--	---	--	--

IMAGE MASK

Oval Square Rounded Corners

ARRANGE IMAGES

Alphabetical Order Shoot Order
 Teachers/Staff first Teachers/Staff last

SPECIAL NOTE

If you have an image or a logo you would like to put in the title please check here. (see directions)

If you would like more text than what is listed please check here and include separate sheet with Composite Order Form.

BACKGROUNDS

Black White Chalkboard Clouds Pencils
 Custom (see instructions on back of print order)

FONTS (Arial is default)

Arial Black Modern Courier New Times New Roman
 Old Text Other: _____

FONT STYLE

Regular Italic Bold Bold Italic

INDEXING

Data matched Camera Cards (In shoot order)
Text File (In shoot order)
 Text File-Not in shoot order (lab approval only)

STUDENT NAMES

Alphabetical Order Shoot Order
 No names Other: _____

INSTRUCTIONS for completing a COMPOSITE ORDER FORM

For your personal records keep a copy of this and completed order forms. When you call to inquire about the production status of this job you will need your 4 digit customer #.

- Original Shoot and Retake Shoot must be included when ordering Composites.
 - Send original, uncropped images in shoot order.
 - Make corrections to Proofs clear and precise.
1. Customer Information: Fill out this section completely. List the school name on the Job Identification line. Be sure to put your telephone number and email address where you can be reached for questions.
 2. Shipping: Fill out the shipping instructions that apply to your order.
 3. Composite Title: Print or type exact title to be used for composites.
 4. Size and Quantity: Check the Print Size and Quantities for each composite. If there is a specific print size not listed check Other and write or type size and quantity.
 5. Layout and Theme: Check the circle for the Layout and Theme of your composite.
 - 5a. Backgrounds: Choose your Background. If you would like a custom composite, attach all information with the Composite Order form. There is a Custom Composite Setup Charge per class. Please call lab for more information.
 - 5b. Font: Select your font for your composites. If you would like a different font other than the listed selection, check other and write your font.
 - 5c. Font Style: Check the circle for your font style here.
 - 5d. Mask: Choose Oval or Square for the images in the composites.
 6. Arrange Images: Check how you would like the order of the images to appear on the composites.
 7. Special Note: Send via email, floppy disk or CD/DVD a clear photocopy of the logo you would like to go on your title for the composite along with special instructions attached to the order form.
 8. Indexing: Select which option applies to you. Camera Cards must be in shoot order. Text Files in shoot order must come to lab via email, floppy disk or CD/DVDs. Text Files out of shoot order are by lab approval only. There is a fee for each name manually entered.
 9. Staff Placement: Check the circle that applies to you. Please attach any additional instructions you may have for Staff Placement with Composite Order Form.
 10. Student Names: Check Alphabetical Order for Composite with Student Names. Check Without Names if Composite does not need Student Names. Send a file by email, floppy disk or CD/DVD format with student data.

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Wedding, Senior, Studio & Reorders Print Order

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(FILM)

CUSTOMER # _____ Telephone # (____) _____ Email _____
(Where you can be reached)

STUDIO NAME _____

STREET _____

CITY _____ STATE _____ ZIP _____

SHIP TO: NAME _____

STREET _____

CITY _____ STATE _____ ZIP _____

Shipping Instructions: (Please Check One)

MAIL		UPS			BUS		FEDEX			PICKUP AT LAB
Postal Service	Next Day Air	Next Day Air Saver	2nd Day	3 Day Select	Ground		Priority One	Standard Overnight	Economy	Saver

JOB IDENTIFICATION _____

DATE JOB SHOT _____ DATE JOB DUE TO SHOW _____

# CDs	# Images	# Rolls	Film Size	Photographer

Wedding • Candid • Studio PROOFS	Wedding • Candid • Studio PRINT ORDERS	SENIORS
<input type="checkbox"/> PROOFS <input type="checkbox"/> 2 1/2 X 3 1/2 <input type="checkbox"/> 3 1/2 X 5 <input type="checkbox"/> 4 X 5 <input type="checkbox"/> 5 X 5 <input type="checkbox"/> 5 X 7 <input type="checkbox"/> 8 X 10 <input type="checkbox"/> Duplicate Proof <input type="checkbox"/> Cut film & bag <input type="checkbox"/> PROOF PACKAGE SPECIALS (from roll film or digital images) DEFINE UNITS _____ _____ _____	# of Negatives _____ # of Rolls _____ # of Strips _____ <input type="checkbox"/> Wedding, Candid, Studio Orders _____ # of Negs	<input type="checkbox"/> PROOFS <input type="checkbox"/> Fixed Lighting Proofs <input type="checkbox"/> Variable Lighting Proofs <input type="checkbox"/> Cut Neg Proofs <input type="checkbox"/> SENIOR ORDERS _____ # of Cut Negs <hr/> <p style="text-align: center;">REORDERS</p> _____ # of Negs

Special Instructions:

Supplies Needed: Rush! / Ship Now Ship With This Order

LAB USE ONLY			
JOB #	_____		
OJN #	_____		
CUST #	_____		
SHIP DATE	_____		
SITTING CARDS	_____		
PROOF(S)	_____		
Order Entry	Breakdown	Editing	Printing
Packing	Final Inspect	Billing	Shipping

ADDITIONAL SERVICES

- 48 Wallet Special
- 96 Wallet Special
- Album(s)
- Album Inserts
- Artwork
- Big Prints
- Calendars
- Canvas Gallery Wrap
- Die Cut Wallets
- Digital Photo CD (specify type)
- Digital Retouching
- Gold or Silver Foil Stamping
- Greeting Cards
- Foam Board
- Lamination
- Locker Prints
- Magnets
- Matte Spray
- Mount Board
- Mouse Pads
- Overlay
- Panel Mount
- Proof Booklet
- Senior School Service Items
- Stretcher Frame
- Templates
- Texturing
- Laser Photo Image Etching
- Other: _____

PAYMENT INFORMATION
Check COD Visa Mastercard Amex MO/ CK. # _____ (Do Not Put Card # - Please call Accounting)
Prepaid Amount: _____
Amount Received: _____ (By Lab)
Received By: _____

Package Print Order

United Promotions, Inc.

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Fax (704) 391-2902

P.O. Box 668268
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(FILM)

CUSTOMER # _____ Telephone # (____) _____ Email _____

STUDIO NAME _____ (Where you can be reached)

STREET _____

CITY _____ STATE ____ ZIP _____

SHIP TO: NAME _____

STREET _____

CITY _____ STATE ____ ZIP _____

Shipping Instructions: (Please Check One)

MAIL		UPS				BUS	FEDEX				PICKUP AT LAB
Postal Service	Next Day Air	Next Day Air Saver	2nd Day	3 Day Select	Ground		Priority One	Standard Overnight	Economy	Saver	

JOB IDENTIFICATION _____

DATE JOB SHOT _____ DATE JOB DUE TO SHOW _____

NO. OF ROLLS	FILM SIZE	FILM TYPE	PHOTOGRAPHER NAME

ORDER TYPE	PACKAGES
<input type="checkbox"/> MULTIPLE POSE PACKAGES (Glamour, Dpt. Stores, Family Portraits, Churches, Fund Raising, etc.)	Estimated Sittings _____ Edit to _____ Pose(s)
<input type="checkbox"/> PORTRAIT PROOF ORDERS (Passing Proofs and taking orders) _____ Size Proof <input type="checkbox"/> Orders from proofs.	<input type="checkbox"/> Check here if package list is attached. Pose 1 _____ _____ Pose 2 _____ _____ Pose 3 _____ _____ Pose 4 _____ _____ Pose 5 _____ _____
<input type="checkbox"/> SCHOOLS <input type="checkbox"/> 2x3 Proofs on Envelope <input type="checkbox"/> Dance-Prom <input type="checkbox"/> Pack in School Envelope <input type="checkbox"/> School Price Insert Copy Attached	
<input type="checkbox"/> SPORTS	
<input type="checkbox"/> REORDERS	
Special Instructions: _____ _____ _____	

Supplies Needed: Rush! / Ship Now Ship With Order

LAB USE ONLY

JOB # _____

OJN # _____

CUST # _____

SHIP DATE _____

DATA BACKS _____

SITTING CARDS _____

PROOF(S) _____

Order Entry	Breakdown	Editing	Printing
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Packing	Final Inspect	Billing	Shipping
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ADDITIONAL SERVICES

3½ Buttons/Mirrors/Magnets

Admission Tickets

Bag Tags & Key Tags

Die Cut Wallets

Digital Retouching

Fun Packs

Greeting Cards

Groups

ID Cards

Individual Photo Magnets

Laminating

License Plate

Locker Prints

Key Chains

Magazine Covers

Memorymats

Mouse Pads

Mugs

Photo Balls

Photo Magnet Cutout

Print Mounting

Proof Booklets

School CDs

Service Items

Statuettes

Sticker Prints

T-Shirts

Texturing

Tote Bags

Fun Posters

Laser Photo Image Etching

Other: _____

PAYMENT INFORMATION

Check COD Visa Mastercard Amex
MO/CK. # _____
(Do Not Put Card # - Please call Accounting)

Prepaid Amount: _____

Amount Received: _____
(By Lab)

Received By: _____