



**COMMUNITY
PUBLICATIONS**

P.O. BOX 48
4815 TRIANGLE ST.
McFARLAND, WI 53558
Phone: 608/838-7972
Fax: 608/838-6135

Name: _____

Company: _____

Address: _____

Phone #: _____ FAX #: _____

E-Mail #: _____

Request for Quote: Order:

Name of Piece: _____

Description: _____

Quantity: _____ / _____ / _____

Size: _____ x _____ Folds to: _____ x _____

Size: _____ x _____ Folds to: _____ x _____

Cover Stock: _____ # _____

Text Stock: _____ # _____

Text Stock: _____ # _____

Number Of Ink Colors On Each Side: Cover (Front) _____ (Back) _____

Text (Front) _____ (Back) _____

Black 4 color process PMS # _____ Bleeds: YES NO

Varnish: Overall Flood Spot Gloss Matte (dull)

Coming In As: Exact Re-Run Film Furnished PDF

Disk Furnished: Program _____ PC ___ MAC ___

Comp & Type B & W Haftone Scans # _____

Other Computer Work _____

Proofs: No Proofs Laser Copy Digital Dylux Digital Color Proof PDF

Finishing: Ship Flat Folding _____ Score (# _____)

Perf Die Cut _____

Saddle Stitch (# of stitches _____) Perfect Bind Glue

Bulk Packed Shrink Wrap (in ___#s)

Drill (___# of holes ___ size) Pad (___# per pad)

Other Operations: _____

Delivery Instructions: _____