

Request For Quote

Previous Job# _____ New Prospect New Client

Date

Quote Due Date

Salesperson

Client name: _____

Client Address: _____

Contact Person: _____ Phone: _____

Email Address _____

Quantities

Description: _____

Option 1: _____

Option 2: _____

Option 3: _____

Option 4: _____

Option 5: _____

Part 1

	<u>INK (side 1)</u>	<u>INK (side 2)</u>	<u>STOCK</u>
Description: _____	<input type="checkbox"/> 4CP _____	<input type="checkbox"/> 4CP _____	<input type="checkbox"/> Cover <input type="checkbox"/> Text
_____	<input type="checkbox"/> PMS: _____	<input type="checkbox"/> PMS: _____	<input type="checkbox"/> Brand _____
_____	<input type="checkbox"/> PMS: _____	<input type="checkbox"/> PMS: _____	<input type="checkbox"/> Weight _____
Versions: _____ #Pgs: _____	<input type="checkbox"/> PMS: _____	<input type="checkbox"/> PMS: _____	<input type="checkbox"/> Color _____
Size: _____	<input type="checkbox"/> Black	<input type="checkbox"/> Black	<input type="checkbox"/> Gloss
<input type="checkbox"/> Bleed <input type="checkbox"/> No Bleed	<input type="checkbox"/> AQ: _____	<input type="checkbox"/> AQ: _____	<input type="checkbox"/> Dull/Matte
Coverage _____ %	<input type="checkbox"/> VAR: _____	<input type="checkbox"/> VAR: _____	<input type="checkbox"/> Uncoated
	<input type="checkbox"/> Laminate: _____	<input type="checkbox"/> Laminate: _____	<input type="checkbox"/> Other _____
	<input type="checkbox"/> UV Coating:	<input type="checkbox"/> UV Coating:	

Part 2

	<u>INK (side 1)</u>	<u>INK (side 2)</u>	<u>STOCK</u>
Description: _____	<input type="checkbox"/> 4CP _____	<input type="checkbox"/> 4CP _____	<input type="checkbox"/> Cover <input type="checkbox"/> Text
_____	<input type="checkbox"/> PMS: _____	<input type="checkbox"/> PMS: _____	<input type="checkbox"/> Brand _____
_____	<input type="checkbox"/> PMS: _____	<input type="checkbox"/> PMS: _____	<input type="checkbox"/> Weight _____
Versions: _____ #Pgs: _____	<input type="checkbox"/> PMS: _____	<input type="checkbox"/> PMS: _____	<input type="checkbox"/> Color _____
Size: _____	<input type="checkbox"/> Black	<input type="checkbox"/> Black	<input type="checkbox"/> Gloss
<input type="checkbox"/> Bleed <input type="checkbox"/> No Bleed	<input type="checkbox"/> AQ: _____	<input type="checkbox"/> AQ: _____	<input type="checkbox"/> Dull/Matte
Coverage _____ %	<input type="checkbox"/> VAR: _____	<input type="checkbox"/> VAR: _____	<input type="checkbox"/> Uncoated
	<input type="checkbox"/> Laminate: _____	<input type="checkbox"/> Laminate: _____	<input type="checkbox"/> Other _____
	<input type="checkbox"/> UV Coating:	<input type="checkbox"/> UV Coating:	

Pre-Press**Media**

- MAC Disk Supplied
- PC Disk Supplied
- Film Supplied
- CRA Supplied
- File E-mailed
- Full Type-set
- Other: _____

Scans

- B&W:Qty: _____
- Color:Qty: _____
- DuoTone
- Other: _____
- _____
- _____

Proofs

- Color Digital-HP
- Color Digital-Fuji
- Dylux
- Randoms
- Other: _____
- _____
- _____

PP Special Instructions**Finishing**

- | | | |
|--|--|--|
| <ul style="list-style-type: none"> <input type="checkbox"/> Perf: _____ <input type="checkbox"/> Score: _____ <input type="checkbox"/> Cut: _____ <input type="checkbox"/> Fold: _____ <input type="checkbox"/> Crash Number: _____ <li style="padding-left: 20px;">Start: # _____ <li style="padding-left: 20px;">Color Ink: _____ <input type="checkbox"/> Collate | <ul style="list-style-type: none"> <input type="checkbox"/> Saddle-Stitch <input type="checkbox"/> Perfect Bind <input type="checkbox"/> Spiral/Coil Bind: _____ <li style="padding-left: 40px;">Color: _____ <input type="checkbox"/> GBC Bind <li style="padding-left: 40px;">Color: _____ <input type="checkbox"/> Case Bind | <ul style="list-style-type: none"> <input type="checkbox"/> Drill: _____ <input type="checkbox"/> Pad: _____ <input type="checkbox"/> Kleenstick: _____ <li style="padding-left: 40px;">Size: _____ <input type="checkbox"/> Shrink Wrap: _____ <input type="checkbox"/> Die Cut: _____ <input type="checkbox"/> Wafer Tab <input type="checkbox"/> Other: _____ |
|--|--|--|

Mailing

- | | | |
|---|---|--|
| <ul style="list-style-type: none"> <input type="checkbox"/> 1st Class <input type="checkbox"/> 1st Class Presort <input type="checkbox"/> Standart <input type="checkbox"/> Non-Profit <input type="checkbox"/> Stamps <input type="checkbox"/> Meter | <ul style="list-style-type: none"> <input type="checkbox"/> De-dupe <input type="checkbox"/> Merge-purge <input type="checkbox"/> NCOA <input type="checkbox"/> Ink Jet Permit <input type="checkbox"/> Database(s) ____ qty <li style="padding-left: 20px;">List furnished in Excel File Format <input type="checkbox"/> Number of mail drops per list ____ | <ul style="list-style-type: none"> <input type="checkbox"/> Mail Pieces <input type="checkbox"/> St. Louis Post Office <input type="checkbox"/> Other Post Office _____ <input type="checkbox"/> List Purchase |
|---|---|--|

Inserting

- # of Pieces _____
- Match and Marry
- Sealed or Unsealed

Packaging Instructions**Special Shipping Instructions**