



COMMUNITY
PRINTERS

QUOTE REQUEST FORM

Organization Name: _____

Your Name: _____

Phone Number: _____

FAX Number: _____

Email: _____

Address: _____

City, State, Zip: _____

Job Description: _____

Quantities Needed: 1) _____ 2) _____ 3) _____ 4) _____

Flat Size: _____

Folded Size: _____

Number of Pages of Text: _____

Number of Pages of Cover: _____

Paper Stock for Text: _____ Weight: _____ Finish: _____

Paper Stock for Cover: _____ Weight: _____ Finish: _____

Ink Colors: _____

Ink Coverage: Heavy _____ Medium _____ Light _____

Coating: Aqueous Coating _____ Spot Varnish _____ UV _____ Laminate _____

Files/Artwork

I will supply an electronic file via: Email _____ Upload to Our Server _____ CD _____ ZIP _____ DVD _____

Other _____

My file will be prepared in: Quark _____ Pagemaker _____ Illustrator _____ Photoshop _____ Freehand _____

Other _____

File work needed: Text Changes _____ Scans _____ Color Corrections _____ Greyscales _____ Duotones _____

CMYK Drum Scans _____ Other _____

Bindery:

Fold _____ Perforate _____ Blind Emboss _____

Saddle Stitch _____ Pad _____ Foil Stamping _____

Perfect Bind _____ Collate _____ Foil Embossing _____

Plastic Coil _____ Wire-O _____

Die Cut _____ Drill _____ Holes (size of hole _____)

Packaging:

Shrink Wrap _____ (in quantities of _____)

Banding _____ (in quantities of _____)

Convenient Cartons _____

Special Labeling _____ (please describe) _____

Other _____ (please describe) _____

Shipping:

I will pick job up _____

Ship to one destination _____

Ship to _____ destinations