

BARRON LITHO

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ORDER/ QUOTE FORM

Date _____ Order Quote

Date Due _____

COMPANY INFORMATION:

Company _____

Address _____ City _____ State _____ Zip _____

Contact _____ Phone _____ Fax _____

BILLING & PAYMENT:

Check or Money Order Credit Account (Local Only) Purchase Order _____

Credit Card: Visa MasterCard Discover American Express

Number _____ Expiration _____

Name on Card _____ Signature _____

FILE INFORMATION:

File Name _____

Platform: Macintosh Windows

Page Layout Program: Quark Xpress Adobe Pagemaker Corel Draw Adobe Indesign
 MS Publisher Excel, Word or PowerPoint Other _____

Trim Size _____

Number of Pages _____

Number of Colors _____

OUTPUT INFORMATION:

Film: Negative Positive Right Reading Emulsion: Down Up

Line Screen : 85 100 120 133 150 175 Other _____

Proofing: B/W Laser Blue Line ColorArt Layered ColorArt Composite
 Matte Fiery Gloss Fiery

Special Instructions: _____
