

Order Date _____ Date Rec'd _____

- Standard Business Card
- 2-Sided Business Card
(2nd side black unless otherwise specified)
- Invitation / Announcement
 - Horizontal
 - Vertical
- Letterhead
- Envelope
- Foil-Stamping / Embossing
- Other _____

Card Stock and Color _____

Ink Color(s) or Foil _____

- 24 Hour Rush Black ink only
- PROOF NEEDED***
- FLAT PRINT***
- * ADDITIONAL CHARGES APPLY
* ALLOW FOR EXTRA TIME ON TURNAROUND

Quantity
 500 1000 Other _____
 Use A Separate Order Form For Each Name & Use Two Order Forms For Two-Sided Business Cards

Stock Art # _____
INDICATE PLACEMENT IN LAYOUT AREA
Layout Number _____
(ALL TYPESTYLES, SIZES, & LAYOUT WILL BE FOLLOWED EXACTLY UNLESS OTHERWISE SPECIFIED)

- ART ATTACHED IS:**
- Entire Card Camera Ready
 - Art is Emailed: artwork pcart Name _____
 - Camera Ready Art With Addition Of BCE Stock Art

PLEASE CHECK ALL BOXES ON THE ORDER FORM INDICATING EXACTLY WHAT YOU WANT, OTHERWISE WE WILL USE OUR DISCRETION IN CREATING YOUR BUSINESS CARD

Secure Artwork
or Sample Here
(always include file # sample)

CAUTION!!!! PROOFREAD CAREFULLY
 "SPECIFIC RESULTS REQUIRE SPECIFIC INSTRUCTIONS"

REORDER
FILE NUMBER

Follow Position,
Size and Style of:

- FILE NUMBER WITH CHANGES.
(PLEASE INDICATE ANY CHANGES)
- EXACT REPEAT OF FILE NUMBER.

Customer Layout Area

- Flush Left **TOP LEFT CORNER COPY**
- Center
- Flush Right

**Indicate MAINLINE
Typestyle & Size**
DRAW ARROW

PLEASE INDICATE WHERE CAPS OR UPPER AND LOWERCASE

**Indicate BODY COPY
Typestyle & Size**
DRAW ARROWS

PLEASE INDICATE WHERE CAPS OR UPPER AND LOWERCASE

- Flush Left **BOTTOM LEFT CORNER COPY**
- Center
- Flush Right

1/4" Margins on all sides unless otherwise specified

Bleeds this side

Bleeds this side

Bleeds this side

Bleeds this side

- Flush Left **TOP RIGHT CORNER COPY**
- Center
- Flush Right

First INK COLOR
DRAW ARROWS

Second INK COLOR
DRAW ARROWS

- Flush Left **BOTTOM RIGHT CORNER COPY**
- Center
- Flush Right

EVERYTHING THAT YOU WANT TO PRINT SHOULD APPEAR IN THIS BOX.

Additional Instructions _____

											CUSTOMER AUTHORIZATION	
NO. OF SETS	OP	CUST'S ART NO TYPE	ART W / CHANGE	SCAN & RETURN	SCANNING	FILE NUMBER	TYPE	PROOF 1	CORRECTIONS	PROOF 2	PRINT	SLITTING

DEALER NAME _____ DO NOT USE AS A DROP SHIP LABEL

ACCT #

Contact _____
FOR QUESTIONS REGARDING THIS ORDER

Telephone () _____

Dealer _____

Address _____
THIS IS YOUR BCE ACCOUNT NUMBER

City _____ **State** _____ **Zip** _____

- CHECK ONE
- BCE Delivery**
Pre-Designated Routes Only
 - Ship UPS**
 - I will pick up order**
 - Drop Ship**
Attach Shipping Label
★ ★ ★ ★ ★

PRICE	<small>BCE USE ONLY</small>
BASE PRICE	
PASTE-UP	
24-HOUR RUSH <small>(BLACK INK ONLY)</small>	

business card express order form

