

BEFORE PLACING AN ORDER GO TO WWW.CALSILKSCREEN.COM AND READ THE ART REQUIREMENTS PAGE

CUSTOMER INFORMATION

Customer Name _____ Company Name _____
 Phone _____ Fax _____
 Address _____ City _____
 State _____ Zip Code _____ Email _____

BILLING INFORMATION

Payment Type _____ Credit Card # _____
 CVS Code _____ Zip Code _____ Expiration Date _____
 CA Resale # _____ Cardholder's Name _____

Submit a copy of your resale certificate otherwise you will be charged sales tax.

ART INFORMATION **IF YOU NEED HELP PLEASE CALL 310-320-5111**

Art File Name _____ Quantity _____ (Minimum Quantity is 100)

Size	Height	Turnaround Time
	Width	

Shape Oval / Circle Rectangle / Square Radius Corners Rectangle / Square Custom / Conforming
(\$0.040 Extra per sticker)

Kisscuts (\$0.025 Extra per sticker)

Punches (\$0.025 Extra per sticker)

Art files must include **Die Line, Bleed** (if necessary) and proper **Safety Margins**. By checking the box below I understand and agree that if any of these elements is missing from the art files I submit I will be charged an extra \$10.00 dollars for each.

My art files are print ready

SHIPPING INFORMATION

I prefer Local Pickup UPS FedEx

Enter Shipping Address if different from above

All orders once placed are final and cannot be changed in anyway. Your order won't be processed unless all the information is complete and all correct/proper digital art files are attached with this form and submitted at the same time.

ALL ORDERS MUST BE PREPAID, NO EXCEPTIONS

FOR OFFICE USE ONLY

Date received :

Special Instructions

SUBMIT ORDER BY EMAIL

OR PRINT AND FAX IT TO 310.320.0558