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ORDER FORM

Date _____ Date Needed _____ Purchase Order# _____

| BILL TO: | | | SHIP TO: | | |
|---------------|--------|------|---------------|--------|------|
| Company Name: | | | Company Name: | | |
| Name: | | | Name: | | |
| Address: | | | Address: | | |
| | | | | | |
| City: | State: | Zip: | City: | State: | Zip: |
| Phone: | Fax: | | Phone: | Fax: | |
| Email: | | | Email: | | |

| FILE FORMATS | PRINT | STOCK | MOUNT |
|---|--|---|--|
| FILENAME(S) _____ _____ _____ FORMAT <input type="checkbox"/> ADOBE PAGESMAKER M/PC <input type="checkbox"/> ADOBE PHOTOSHOP M/PC <input type="checkbox"/> ADOBE INDESIGN M/PC <input type="checkbox"/> ADOBE ILLUSTRATOR M/PC <input type="checkbox"/> ADOBE ACROBAT M/PC <input type="checkbox"/> QUARK XPRESS Mac <input type="checkbox"/> COREL DRAW PC <input type="checkbox"/> MICROSOFT OFFICE <input type="checkbox"/> PDF <input type="checkbox"/> TIFF <input type="checkbox"/> JPEG <input type="checkbox"/> OTHER | QTY _____ IMAGE SIZE(S) _____ ORIENTATION <input type="checkbox"/> Normal <input type="checkbox"/> Mirror INK <input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor TRIM <input type="checkbox"/> To crops <input type="checkbox"/> No trim <input type="checkbox"/> To size: _____ | <input type="checkbox"/> HP Heavyweight Coated <input type="checkbox"/> Graphix Universal Photobase <input type="checkbox"/> High Gloss Photo <input type="checkbox"/> ThriftyBanner <input type="checkbox"/> Polyester Backprint Film <input type="checkbox"/> Trade Show Graphics <input type="checkbox"/> Wall Paper LAMINATING <input type="checkbox"/> 3 MIL <input type="checkbox"/> 5 MIL <input type="checkbox"/> 10 MIL <input type="checkbox"/> GLOSS <input type="checkbox"/> MATTE <input type="checkbox"/> LUSTER <input type="checkbox"/> LEXAN <input type="checkbox"/> 15 MIL WHITE OPAQUE BACKER | BOARD SIZE <small>(default = same as image size)</small> BOARD MATERIAL <input type="checkbox"/> Fome-Cor® <input type="checkbox"/> Gatorfoam®(std) <input type="checkbox"/> Sintra® PVC <input type="checkbox"/> Artboard 1x 3x <input type="checkbox"/> Acrylic (plexi) <input type="checkbox"/> Aluminum <input type="checkbox"/> Coroplast <input type="checkbox"/> Customer-provided <input type="checkbox"/> Other: |
| SOURCE <input type="checkbox"/> CD <input type="checkbox"/> ZIP <input type="checkbox"/> FLOPPY <input type="checkbox"/> DVD <input type="checkbox"/> FTP: _____ <input type="checkbox"/> EMAILED TO: _____ | PROOF <input type="checkbox"/> Provided <input type="checkbox"/> No proof Make a proof, size: (Default = 20-50%) GROMMETS <input type="checkbox"/> Yes <input type="checkbox"/> No | BOARD THICKNESS 3mil 5mil 6mil 10mil 1/8" 3/16" 1/4" 3/8" 1/2" 1" <small>(std) (std)</small> Other: | BOARD COLOR ADHESIVE <input type="checkbox"/> White Black <input type="checkbox"/> Opaque (std) Other: <input type="checkbox"/> View-Thru MOUNT SIDE <input type="checkbox"/> "Rear-mount" <small>(Ink side facing away from substrate, for standard opaque mounting boards)</small> <input type="checkbox"/> "Face-mount" <small>(Ink side facing substrate, for view-thru substrates or reverse-print media)</small> MOUNT POSITION <input type="checkbox"/> Flush (std) <input type="checkbox"/> Center image Other: |

METHOD OF PAYMENT

Payment method: Visa MasterCard Check COD

Primary Card: MC Visa:Card # _____ Expiration Date: _____

Signature: _____ Date: _____