

JOB INFORMATION SHEET

Must accompany all print jobs submitted to Western Oregon Web Press

Today's Date: (mm/dd/yy)

Your Company:

Your Name:

Phone:

(sample: 555-333-9876)

Fax:

(sample: 555-333-9876)

Email:

Publication Name:

Completion Date Requested: (mm/dd/yy)

Number of Pages:

Run Quantity :

Format:

Final Trim Size:

Paper Type:

INKS Ink Colors: on page(s):
Ink Colors: on page(s):
Ink Colors: on page(s):
Ink Colors: on page(s):

INSERTS #1 Name: Type: Qty:
#2 Name: Type: Qty:
#3 Name: Type: Qty:

DELIVERY Information

Customer Pickup WOWP Delivery UPS Ship Via:

Delivery Address:

Is this your "PickUp"
Address too?

Additional Notes:

Or special instructions:



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