



Digital File Information

Date: _____

Customer: _____

Contact: _____

Phone: _____ Fax: _____

E-mail Address: _____

Job Name / Description: _____

Independence Press, Inc.
970 925-7064 • Fax 970 925-5932
indpress@sopris.net
www.independencepress.net

Computer Platform: PC Mac

Disc Type: Zip CD Floppy E-mail

Proof: Fax E-mail In person _____ **Printout(s) included:** Yes No

Proof Type: Fax PDF Blueline Ink-jet color Other _____

A signed proof will be required before print production commences.

WHO created this file? Name _____ Phone _____ E-mail _____

Software Program used to create file:

- | | |
|---|--|
| <input type="checkbox"/> Microsoft Word, Version _____ | <input type="checkbox"/> Corel Word Perfect, Version _____ |
| <input type="checkbox"/> PageMaker, Version _____ | <input type="checkbox"/> Quark Xpress, Version _____ |
| <input type="checkbox"/> Microsoft Publisher, Version _____ | <input type="checkbox"/> Microsoft Excel, Version _____ |
| <input type="checkbox"/> Adobe PhotoShop, Version _____ | <input type="checkbox"/> Adobe Illustrator, Version _____ |
| <input type="checkbox"/> PostScript or Adobe PDF | <input type="checkbox"/> Other—name and version: _____ |

File name(s): _____

Fonts used: (EXACT names) _____ **Fonts Included:** Yes No

Graphic files: _____ **Graphics Included:** Yes No

(EXACT names including file extensions such as *wpg, tif, doc, jpg, bmp, eps, gif, wmf, or cpt*)

Changes to be made by: Customer Independence Press Other _____