



ARTWORK REQUEST FORM

DATE: _____

CUSTOMER NAME: _____

CUSTOMER #: _____

BAND STYLE: _____

DESCRIPTION (LAYOUT) please circle the correct position of your logo

CENTERED (FR3)



END STAMP (FR12)



BOTTOM STAMP (FR5)



TOP STAMP (FR1)



SNAP END (FR14)



END STAMP (FR15)



SNAP END (FR13)



OTHER - PLEASE SPECIFY: _____

SERIAL NUMBERS:

NO

YES

Please circle the correct location

FR12



FR13



OTHER - PLEASE

SPECIFY THE LOCATION: _____

WORDING:

ALL CAPS

Upper & Lower Case

IMPRINT COLOR: _____

CUSTOMER CARE E-MAIL ADDRESS