



Dallas County Community College District
BROOKHAVEN • CEDAR VALLEY • EASTFIELD • EL CENTRO • MOUNTAIN VIEW • NORTH LAKE
RICHLAND • BILL J. PRIEST • R. JAN LECROY CENTER

Contact Name: _____ **Phone:** _____ **Fax:** _____

Today's Date: _____

Item #/ASI #/Catalog Name: _____

Quantity: _____

Product Color: _____

Size: _____

Imprinting: Yes Both Sides No Imprinting

PMS Ink Colors: _____

Date Products Needed: _____

Notes/Comments: _____

Authorization to order: _____ **P.O. #:** _____

Fax quote and hard copy of art to Mastercraft at 214-441-9723

TO BE COMPLETED BY MASTERCRAFT

Type of file needed for artwork: _____

Imprint Size: _____

Delivery: _____ (after proof approval plus shipping time)

Unit Price (Includes set-up and freight): _____

Total: _____

Notes: _____

Signature: _____ Date: _____

COLLEGE OFFICE USE ONLY
Date Art Emailed: _____
Date Product Rec'd: _____
Date disk returned: _____ <input type="checkbox"/> N/A
OK to order faxed w/art: _____