

Un-Framed Styrene Board Artwork Approval Form

PLEASE DO NOT send back this form blank. It **ALL MUST** be filled out- even on repeats!

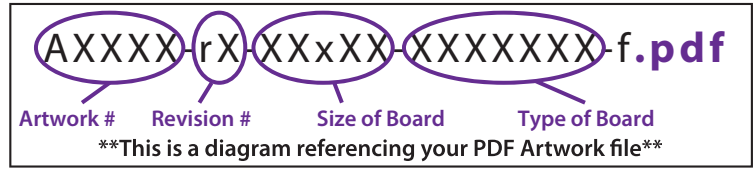
We **WILL NOT** begin production until this form is completed.

A Note from the Manufacturers:

The client is also responsible for orientation, foreign language translations, spelling, punctuation, grammar, variable data, logos, graphics, colors, etc. These elements can be checked using the two PDF proofs provided.

The "Artwork"

Use the **PDF files** you received via email when filling this section out. **See diagram to the right for reference.**



Layout Front

Artwork #: A _____

Revision # of artwork: r _____

Quantity of Placards ordered: _____

Back

Artwork #: A _____

Revision #: r _____

OR

Back is Bare-Just One Side Printed

Size

Rectangle _____ Height

Corners are rounded - How many are rounded _____

Triangle _____ Width

It is OK that they are not Dry erase

It is OK That there is no Frame

.020" Styrene

They Must Be Dry Erase

It is OK there is no mounting

.040" Styrene

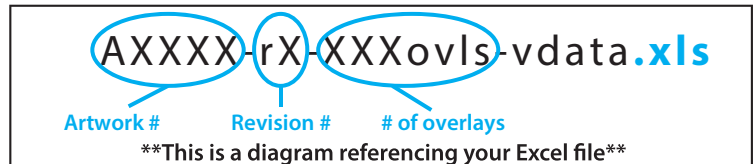
.060" Styrene

I have proofread the text and hereby approve the grammar, syntax, spelling, and punctuation on the board.

I have carefully inspected the graphic elements including dividing lines, clip art, logos, and colors and hereby approve the quality, alignment, and appearance of the overlay.

"Variable Data"

Variable data (pre-printed room and phone numbers that vary overlay to overlay) is an optional service. If ordered, use the **Excel file** you received via email when filling this section out. **See diagram to the right for reference.**



Front of Board

There is **no** variable data.

There is Variable Data on Front

Revision # of Excel file: _____

of Blanks: _____

Back of Board

There is **no** variable data.

There is Variable Data on Front

Revision # of Excel file: _____

of Blanks: _____

By signing this approval, I understand that the overlays are custom made and are not returnable for any of the approved items on this form. I understand that I will get exactly what I am signing off on and I will accept what I have approved. I understand that any deviations or defects from the approved artwork will be replaced at Indoff's expense.

Your Signature and Date

Your Supervisor's Signature and Date (Optional)

Purchase Order Number from Purchasing or Materials Dept. (Optional)

Purchasing Organization, Company, or Hospital

Fax: 860-632-2028

Email: ahutton@ahutton.com
Phone: 860-632-2026

Indoff  **Hospital Boards**