AR-EN party printers, inc.

Phone 847.673.7390
3416 Oakton Street

Fax 800.390.3055
Skokie, Illinois 60076

For AR-EN Office Use Only

REQUIRED INFORMATION: Please print legibly and complete all fields to ensure correct production and shipping of your order.

Your Account Number	Your Job Name or PO Number	Date of Event	Date Needed (dates only, no ASAP)	Order Submitted By:	Page ____ Of ____

Ship to My Account Address:

Account Name

Address

City State Zip

Phone Fax

Email Address

Ship to My Customer

Ship To

C/O

Address

Suite or Apartment Number

City State Zip

Delivery/Shipping: ☐ Ground ☐ 2 Day Air ☐ 3 Day Air ☐ Next Day by noon ☐ Next Day by end of day ☐ Pick Up

product	color/paper	qty	foil	AR-EN design & size	font & case	proof?
			☐ shiny ☐ brushed ☐ matte	☐ s ☐ m ☐ L	☐ U/l ☐ UC ☐ lc	☐ yes ☐ no
ONE PRODUCT PER ORDER FORM (e.g. beverage napkins on one form, guest towels on next form)			☐ shiny ☐ brushed ☐ matte	☐ s ☐ m ☐ L	☐ U/l ☐ UC ☐ lc	☐ yes ☐ no
			☐ shiny ☐ brushed ☐ matte	☐ s ☐ m ☐ L	☐ U/l ☐ UC ☐ lc	☐ yes ☐ no
			☐ shiny ☐ brushed ☐ matte	☐ s ☐ m ☐ L	☐ U/l ☐ UC ☐ lc	☐ yes ☐ no
			☐ shiny ☐ brushed ☐ matte	☐ s ☐ m ☐ L	☐ U/l ☐ UC ☐ lc	☐ yes ☐ no

seating cards:

Inside Copy

☐ Please be seated at table___

☐ We welcome you Table___

☐ Other (indicate in "copy & diagram" box to the right)

foil_____

font_____

Unimprinted Appliqués

name_____

paper_____

qty_____

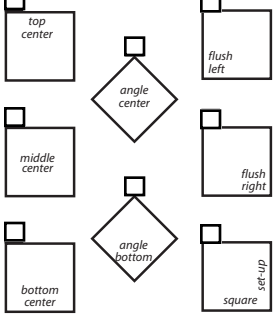
adhesive squares: ☐ Yes ☐ No

copy & diagram

all copy must be clearly printed and positioned as it should appear.
ar-en is not responsible for errors due to illegible handwriting.
copy will be sized to fit unless otherwise specified.

copy layout

please select your copy layout with an "X"



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