

the approved final Proof before 1:00pm PST on _____.

We will ship this order within _____ working days after receiving the final approval.

P.O. Number:

Company:

carefully. It is your responsibility to check this proof for errors.



By signing this approval, you accept all responsibility for errors in this artwork.

APPROVED: _____

DATE: _____

PLEASE RETURN BY FAX TO:
1-760-775-2422

