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Project Specification Sheet

Easy E-Mail or Fax Form

COMPANY or ORGANIZATION NAME: _____

CONTACT PERSON: _____

ADDRESS: _____
No. Street City State Zip

WORK #: _____ CELL#: _____ E-MAIL: _____

Project Name: _____ Date: _____

Flat Size: _____ Folded Size: _____

Please check off your project below:

LOGO Design **Stationery Printing** **Signs or** **Banner Design**

1 side or 2 sides Quantity: _____ Bleeds: YES NO

Description of Product: _____

Stock or Material: _____

Color Of Ink(s): _____ or Full Color Process? _____

United Printing to Design: YES NO *I have my own design*

Requesting Final Proof before production: YES NO

Deadline or date Need By: _____

FOB: _____

COMMENTS: _____

OFFICIAL USE ONLY: Estimate Pricing: _____