



ARC™ **ARC Dayton**
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Dayton, OH 45402
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1 of _____ Tracking Number _____

FOR INTERNAL USE ONLY (DO NOT WRITE IN BOX BELOW)

Date Picked Up _____ Time _____ Driver _____

Code	Large Format Quantity	Code	Narrow Format Quantity

CUSTOMER INFORMATION

Company Name	
Location	
Phone Number	Ext
Ordered By	
P.O. Number	
Job Name	
<input type="checkbox"/> Keep Job On File (If keeping job on file, please contact our Bid Department)	

DELIVERY METHOD	DATE AND TIME DUE
<input type="radio"/> Deliver <input type="radio"/> CPU <input type="radio"/> Call When Ready	Date Due _____
<input type="radio"/> Waiting Ship Via _____	Time Due _____

DISTRIBUTION / SHIP TO ADDRESSES

Address		
City	State	Zip
<input type="checkbox"/> See Attached List		

LARGE FORMAT INSTRUCTIONS

Number of Originals	Number of Sets Required
<input type="radio"/> Bind Edge <input type="radio"/> Staple Edge <input type="radio"/> Loose <input type="radio"/> Fold	
<input type="radio"/> Copy Output Size = 100% <input type="radio"/> Reduce / Enlarge To _____ %	
<input type="checkbox"/> Use Recycled Media	
Notes:	

NARROW FORMAT INSTRUCTIONS

Number of Originals	Number of Sets Required
<input type="radio"/> GBC <input type="radio"/> Plastic Spiral Coil	<input type="radio"/> Staple <input type="radio"/> Loose
<input type="radio"/> Single Sided <input type="radio"/> Double Sided	<input type="radio"/> B/W Copies <input type="radio"/> Color Copies
<input type="checkbox"/> Use Recycled Media	
Notes:	

Reset Form

Print Form