AUBURN PRINTERS
COMPUTER FILE OUTPUT REQUEST

Date Received:_____   Preflight Due:_____

COMPANY NAME	CONTACT PERSON & PHONE #:	JOB TICKET #:
	/	

FILE INFO

1. Software Application & Version number used: _____

   File Name(s)_____

2. ❏ **PC**   ❏ **MAC**

3. Have you included a printout of your file(s) (including separations) with this order? ❏ Yes ❏ No

4. Do we need to make any corrections/additions to your file before output? ❏ Yes ❏ No

   Special Instructions: _____

   _____

5. Are your fonts included? ❏ Yes ❏ No   **6.** Are your graphics included? ❏ Yes ❏ No

PREFLIGHT

❏ A laser test print of your file(s) was necessary.   ❏ Yes, your file(s) will output correctly.

❏ Clean-up and/or adjustment of your file(s) is required for proper quality output. The estimated time to do so is: _____

Missing Fonts	Date	**Extra Scans**	Date
_____		_____	
_____		_____	
_____		_____	
_____		_____	
_____		_____	
_____		_____	

Missing/Problem Graphics	Date	**Additional Information** _____
_____		_____
_____		_____
_____		_____
_____		_____
_____		_____
_____		_____

❏ Disks returned to client on the following date: _____