

PROOF APPROVAL

client:	date:	
project:	job #:	
layout/comprehensives Layout/Design Captions/Quotes Logos Halftones: cropped/sized PMS Color(s) matches Trims/Bleeds Headlines/Subheads Addresses Other (please indicate below)	☐ Page content ☐ Graphic treatments ☐ Folds/Perforations ☐ Postal indicia/o ☐ Spelling/punctuation ☐ Screens ☐ Phone numbers ☐ Paper stock/weight/o	
blueline/color proof Trim Hickies/marks Clarity of graphics PMS color matches Diecuts/embossing/foil stamps Spelling/punctuation Placement of graphics Color shifts Verify quantity for delivery Other (please indicate below)	☐ Reverses ☐ Color: placement ☐ Screens: density/posit ☐ Registration ☐ Fold(s)/perforations ☐ Placement of text ☐ Photo sizes ☐ Addresses	tion
This is to verify that I/we, representing the project materials described, shown or atta I/we understand that revisions, error corrected deemed "new work" and invoiced in addit of revisions or error corrections made in a	ached here. I/we accept full responsibility rections and/or preference changes after ion to this project's fees and reimburse	ity for this final approval. r this approval with be ments, with the exception
Signature	Print Name/Title	Date