

## **REPRINT** ORDER FORM

## **CUSTOM REPRINTS**

Date			
Issue			
Article Title			
Author			
Send proofs and finished material to:			
Contact Name			
Company			
Address			
City	State	ZIP	
Phone	_ Fax		
Email			
Authorized Signature			
CUSTOM REPRINT SPECIFICATIONS/INSTRUCTIONS:			
Note: You will be provided with a proof to review your o	custom reprint before your orde	er is printed.	
Mail your order form to: Information Today, Inc. • Attn: Johanna McBride • 14 or fax to: (609) 654-4309 Contact Johanna McBride directly for more info.		d, NJ 08055	

Yes, Please enter my order for the following items:	
Price	
Custom Reprints: Oty, No. of pages,	
Color choice 4C 2C 1C (fill in price from rate card)	\$
Note: Custom reprint price does not include shipping and customization char	rges.
PDF only: \$550 per page	\$
Sub Total:	\$
CT, KY, WI must add sales tax:	\$
Total:	\$
CREDIT CARD: $\square$ MC $\square$ VISA $\square$ AMEX $\square$ DISCOVER	
CREDIT CARD #	
EXP. DATE	
CREDIT CARD PAYMENT IS REQUIRED FOR ALL FIRST-TIME ORDERS. Your billed after your order is processed and shipped.  ** Please note that prices on the previous page are not inclusive or	
any special customization charges that may be applicable.	i sinpping charges and
Any additional customization, handling, and shipping charges will	be added to your order
Authorized Signature/Title	
Date	

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