

proof approval

project title:
client:

project number:
date:

layout/comprehensives

- | | | |
|---|---|--|
| <input type="checkbox"/> Layout/Design | <input type="checkbox"/> Halftones: cropped/sized | <input type="checkbox"/> Headlines/Subheads |
| <input type="checkbox"/> Page content | <input type="checkbox"/> Postal indicia/codes/permits | <input type="checkbox"/> Phone numbers |
| <input type="checkbox"/> Captions/Quotes | <input type="checkbox"/> PMS Color(s) matches | <input type="checkbox"/> Addresses |
| <input type="checkbox"/> Graphic treatments | <input type="checkbox"/> Spelling/punctuation | <input type="checkbox"/> Paper stock/weight/color |
| <input type="checkbox"/> Logos | <input type="checkbox"/> Trims/Bleeds | <input type="checkbox"/> Other (please indicate below) |
| <input type="checkbox"/> Folds/Perforations | <input type="checkbox"/> Screens | |

Other: Indicate special requirements _____

blueline/color proof

- | | | |
|--|--|--|
| <input type="checkbox"/> Trim | <input type="checkbox"/> PMS color matches | <input type="checkbox"/> Placement of graphics |
| <input type="checkbox"/> Reverses | <input type="checkbox"/> Registration | <input type="checkbox"/> Photo sizes |
| <input type="checkbox"/> Hickies/marks | <input type="checkbox"/> Diecuts/embossing/foil stamps | <input type="checkbox"/> Color shifts |
| <input type="checkbox"/> Color: placement | <input type="checkbox"/> Fold(s)/perforations | <input type="checkbox"/> Addresses |
| <input type="checkbox"/> Clarity of graphics | <input type="checkbox"/> Spelling/punctuation | <input type="checkbox"/> Verify quantity for delivery |
| <input type="checkbox"/> Screens: density/position | <input type="checkbox"/> Placement of text | <input type="checkbox"/> Other (please indicate below) |

Other: Indicate special requirements _____

special notes or instructions

This is to verify that I/we, representing the above named client company, have thoroughly reviewed the project materials described, shown or attached here. I/we accept full responsibility for this final approval. I/we understand that revisions, error corrections and/or preference changes after this approval will be deemed "new work" and invoiced in addition to this project's fees and reimbursements, with the exception of revisions or error corrections made in association with this form, prior to final approval.

Client Approval Signature: _____ Date: _____

For [designer]: _____ Date: _____