

HOAG & SONS', INC.

145 N. MAIN ST. • EATON RAPIDS, MI 48827 • (517) 857-2033 • (517) 857-4194 Fax

New Customer Information Sheet

Name of Publication(s) _____

Ship _____ Bill _____
To: _____ To: _____

Check if you would like **invoices**: Faxed _____ Emailed _____ Mailed _____

Service(s) Requested (check all that apply): _____ Binding _____ Microfilming _____ Digital Scanning

About Your Newsfiles

Newsfile Size

_____ Broadsheet (metro) _____ Tabloid

Frequency of Publication (circle)

Daily Weekly Semi-Weekly Tri-weekly Monthly Other _____

Dates or holiday where papers are not published _____

Method of Shipping Files To Hoag

_____ Customer will place Hoag on their mailing list as a subscriber, EFFECTIVE _____

_____ Customer will hold all files for bulk shipping to Hoag, based on a predetermined time frame

Production Requirements

Binding	Microfilming	Digital Scanning
Number of bound copies(books) per binding period _____ Newsfiles are to bound by: Calendar Date _____ or Volume numbers _____	Number of duplicates _____ Duplicate Type (circle) positive negative	Output format (circle) JPG PDF TIF

Circle items to be included in the Binding, Scanning or Microfilming (Additional charges may apply):

Advertising Inserts Supplements(Parade,etc) Special Sections, Other _____

For additional services, circle the following (Additional charges may apply):

Front Cover Stamping Volume Stamp Edition Stamp Color Buckram Monthly Index Tabs

Contact Information

Contact For Production Issues: _____ Phone _____

Contact For Admin. Questions: _____ Phone _____

Fax _____ Email _____

Authorized Signature: _____ Title: _____