

(COMPANY NAME)

PO:0000000000

Date: 00/00/0000

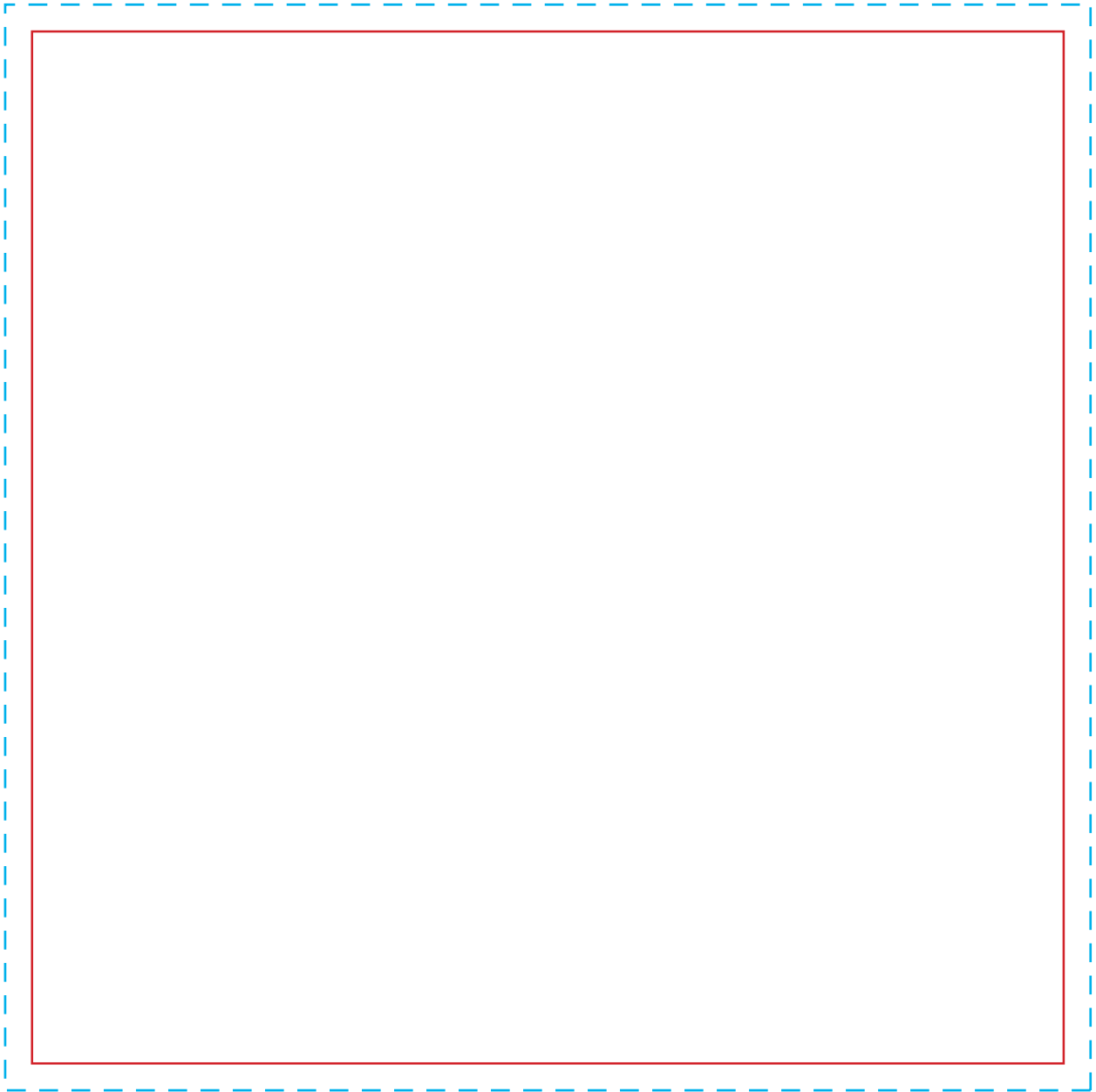
Fax: 000-000-0000

Attn: Name

SCALED DOWN TO 40%

16"

16"



RED LINE INDICATES EDGE OF CHAMOIS
 DASHED BLUE LINE INDICATES REQUIRED BLEED SPACE



TO DISTRIBUTOR AND YOUR CLIENT, FOR YOUR PROTECTION AND OURS:

By signing this artwork approval, you have verified and agreed with the logo and text, logo size and printing position. You authorize us to proceed with the production and you are accountable for the full value of the order due to mistakes or changes to the logo, as mentioned above.

SIGNATURE

DATE

