



MARKETING – PRINT APPROVAL FORM

Date _____

Department _____

Approval by _____

This form must accompany all print jobs and be returned to publications department with all information filled in before your job can be printed.

Job Title

Final Proofing: (Please print name and initial) The Marketing department will do basic editing and spell-checking, but oversights occur, so please read your document carefully. You will be responsible for final proofing.

This document has been checked

by: _____

Quantity _____

Cost _____

PO Number _____

Vendor _____

Delivery Date _____