

CIRRUS DIGITAL IMAGING: Scan Submission Form

Date: _____

Name/Company: _____ Phone #: _____

Job Name or #: _____

Delivery to us: Freight service: _____ FTP Request return by: _____

	Code	ORIGINAL		SCAN TYPE		SCAN AREA		SCAN SIZE (FILL IN A OR B)			
		(Check One)		(Check One)		(Check One)		A. File Size		B. Print Size	
		Film	Refl	RGB	GS	Full Fr	Cropped	RGB MB	GS MB	Dimensions	DPI
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											
16											
17											
18											
19											
20											

Submission Requirements: Please read carefully

All scans will be delivered on CD unless otherwise specified.

Identification

Please submit all film in separate envelopes. You should assign a number or code to each item sent, it should be printed on the film envelope. For