

Copy Sheet

 PUBLICATION SIZE PHONE	ISSUE	COPY SOURCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	CLASSIFICATION					
	<input type="checkbox"/> ALPHA LISTING	<input type="checkbox"/> NAME DIFFERS				
	(JOINT USER)					
INSTRUCTIONS						

PROOF		ATTENTION:			SALES REP:	
NO PROOF	<input type="checkbox"/>	ADDRESS: Ave				
MAIL	<input type="checkbox"/>	CITY: STATE: ZIP:			DATE:	
HAND DELIVER	<input type="checkbox"/>					
EMAIL	<input type="checkbox"/>	EMAIL:				