


Copy Sheet

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

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