

Preflighting Request Form

Job Name _____

Charge Number _____

Date Submitted: _____

Contact: _____ Extension: _____

File Information

File Location: _____

File Name: _____

Software: _____ Version: _____

File Name: _____

Software: _____ Version: _____

Font Information

Any fonts that are not in the GATF Basic or GATF Extra Font

Sets. _____

Picture Information

Any necessary information about any of the graphics found

in the file. _____

File Information

Any important info such as specs for indicia etc. _____

Output Information

Film RC paper

Negative Positive

E-Up E-Down

Output all pages Output from _____ to _____

Page Size _____

Output at 100% Output at _____%

Electronic Finishing

Include register marks/crop marks

Check & apply traps

Perform color correction

Outline images (How many? _____)

Check bleeds

Output imposition

Reader spreads Printer spreads SS PS

Output Resolution

1200/1270dpi 2400/2540 3000+

Screen Ruling

65 85 120 133 150 _____

Color Separation Plates

Cyan Magenta Yellow Black

_____ _____ _____ _____

Color Proof Specification

Proof all pages

Proof the following pages: From _____ to _____

Lasers Provided

Yes No