



# CUSTOM SIGN ORDER FORM

Custom Signs by:

KATHERINE  
 F R A N K  
 C R E A T I V E  
 I N C

1009 N. Lombard Road, Lombard, IL 60148  
 (630) 620-7720 ■ (630) 396-3026 FAX

www.katherinefrank.com

- |   | QUANTITY |
|---|----------|
| <input type="checkbox"/> 14"x22" Poster board ..... \$56.00   | _____    |
| Standard color board, vinyl and 5 lines of copy.*   |          |
| <input type="checkbox"/> 22"x28" Poster board ..... \$78.00   | _____    |
| Standard color board, vinyl and 5 lines of copy.*   |          |
| <input type="checkbox"/> 28"x44" Poster board ..... \$106.75  | _____    |
| Standard color board, vinyl and 5 lines of copy.*   |          |
| <input type="checkbox"/> 31"x99" Banners ..... \$260.00   | _____    |
| Standard color banner, vinyl and 3 lines of copy.*  |          |
| <input type="checkbox"/> Vinyl Application (Pricing varies depending upon size and color of the application.) |          |

CHECK  DESIRED & INDICATE THE QUANTITY OR CALL FOR A QUOTE.

\* All signs can be printed with logos for an additional charge. Standard rates include digital art provided in Illustrator 8.0 format with an .eps or .ai extension and all fonts should be saved to outlines. Scan charges for flat art are additional.

**Complete Custom Show Services**

Booth Design, Booth Construction & Set up  
 Digitally Printed Posters, Murals and Banners  
 3-D Lettering and Vinyl Logostyle Lettering  
 Illuminated signage  
 Custom Show Props

**2 WEEK DEADLINE: All orders should be placed no later than two weeks before show date.**

(ANY ORDERS AFTER THIS DATE WILL RESULT IN A RUSH CHARGE.)

SERVICES WILL BE RENDERED UPON RECEIPT OF FULL PAYMENT ACCOMPANIED BY THIS ORDER FORM. PAYMENT MAY BE MADE WITH CHECK (Payable to: Katherine Frank Creative, Inc.) OR MAY BE MADE WITH AMEX, VISA OR MASTERCARD BY COMPLETING THE FORM BELOW (Credit Card required for work done 2 weeks before show):

CARD MEMBER NAME: \_\_\_\_\_

Charge to:  VISA  MasterCard  AMEX (Please Print) V-CODE: \_\_\_\_\_

ACCOUNT NUMBER: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Fill out and return with payment (PLEASE PRINT OR TYPE):

SHOW NAME: \_\_\_\_\_

SHOW FLOOR #: \_\_\_\_\_ BOOTH #: \_\_\_\_\_

FIRM NAME: \_\_\_\_\_

FIRM ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

AUTHORIZED NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

AUTHORIZED SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

## **CUSTOM SIGN ORDER FORM**

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### **COPY TO READ:**

(Type or print copy for signs in this space. Attach logo here and call out color and size.)

