



5400 Grays Avenue, Philadelphia, PA 10143

Tel (215)724-1700 / Fax (215) 726-2930

Insert Confirmation Form

Attention: Customer Service Department

Name of Insert: _____

Publication we insert into: _____

Date of Insertion: _____

Size of Insert: _____ Quantity/Circulation: _____

How many Boxes: _____

Is this a full run Insert: _____ If not please list Zip Code breaks below

Are there certain Zip Codes to be Inserted, If so please supply a list of Zip Codes below:

Do we insert until we run out of Inserts?: _____

Do office copies get Inserted?: _____

How will Bartash receive the Inserts?: _____

What day can we expect the delivery of Inserts?: _____

Has Bartash been notified?: _____ Date of notification?: _____

Do you need any leftover Inserts to be sent back?: _____

Where should we send leftover Inserts?: _____

Special Instructions: _____

In Order to Insure Delivery of Above Inserts all Boxes Sent to
Bartash Printing Must be Marked as Follows:

SHIPPING ADDRESS AND INFORMATION REQUIRED TO RECEIVE INSERTS	Bartash Printing, Inc. Attention: Rich Moler 5400 Grays Avenue Philadelphia, PA 19143
---	--

Bartash Printing Must Receive Insert Confirmation Form (7) Days Prior to Printing.
Bartash Printing Must Receive All Inserts (3) Dates Prior to Insertion

A Visual of the Insert Must be Faxed Along with this Form