



# UPC BIPAD Periodical Format Symbol Specification Sheet and Order Form For Magazines

Complete A Separate Sheet For Each Magazine Title

### Billing Information:

Name: \_\_\_\_\_ Title: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

How did you hear about PIPS: \_\_\_\_\_

Magazine Cover price \$ \_\_\_\_\_ (US) \$ \_\_\_\_\_ (Canada)

Print price above barcode? (Yes or No): \_\_\_\_\_ If Yes, this will incur an additional \$5.00 charge per code.

The name of the Magazine is: \_\_\_\_\_

The BIPAD title number given the magazine is \_\_\_\_\_

The frequency of publication is(e.g. monthly or quarterly or annual, etc.): \_\_\_\_\_

The issue designation(s) on the cover (e.g. June or Winter or Date or #8, etc.) that I would like to order UPC Codes for are:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Please check off your desired file format and delivery method:

EPS File format: Mac \_\_\_\_\_ or Windows PC \_\_\_\_\_

Delivery Method: CD-ROM \_\_\_\_\_ or E-mail address (if shipping via e-mail): \_\_\_\_\_

Cover printing process used (e.g. web or sheetfed offset, letterpress, gravure, etc.): \_\_\_\_\_

Cover paper used (e.g. weight, coated, newsprint, etc.): \_\_\_\_\_

Name, address and phone number of printer: \_\_\_\_\_

**WE MUST HAVE THE ABOVE INFORMATION IN ORDER TO DETERMINE THE MINIMUM POSSIBLE SYMBOL SIZE AND TO ALLOW FOR INK BLEED AND CONSEQUENT BAR WIDTH GAIN.**

**A COPY OF THE COVER OF SEVERAL PAST ISSUES TO EXAMINE THE PRINTING WOULD ALSO BE HELPFUL.**

### RETURN THIS SHEET TO:

**PUBLICATION IDENTIFICATION & PROCESSING SYSTEMS**

A DIVISION OF PRODUCT IDENTIFICATION & PROCESSING SYSTEMS, INC.

10 Midland Avenue, Ste. M-02, Port Chester, NY 10573

Phone: 212-996-6000 • Fax: 212-410-7754

E-Mail: masters@pips.com

**THIS ORDER IS GIVEN SUBJECT TO ALL OF THE TERMS AND CONDITIONS ON THE FACE AND REVERSE SIDES HEREOF, INCLUDING THE PROVISIONS FOR ARBITRATION AND SELLER'S WARRANTIES. ALL OF WHICH ARE ACCEPTED BY BUYER.**

Date: \_\_\_\_\_

### Shipping Information (for CD-ROM orders):

Name: \_\_\_\_\_

(PLEASE PRINT)

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: (\_\_\_\_\_) \_\_\_\_\_

Signature: \_\_\_\_\_