



ORDER DETAIL FORM

Serving all your digital media needs

Please complete ALL sections. Use "X" to select the appropriate checkbox and "N/A" if an answer is not applicable.

Company Details		Date: / /	
Name:			
Address:			
Website:			
Contact Person			
Name:		Email:	
Title:		Phone:	
		Fax:	

1. Source Material (Enter Number in Box)

- Negatives Transparencies Slides
 Photographs Prints

Negatives Size: _____ **Transparencies/Slides Size:** _____

Photographs Size: _____

Negatives:

- 35 mm 120 mm 45 x 60 mm 45 x 57 mm 60 x 60 mm 57 x 42.5 mm
 57 x 57 mm 57 x 70 mm 57 x 78 mm 57 x 182 mm 24 x 65 mm 24 x 35 mm
 4" x 5" mm

Transparencies/Slides:

- 35 mm 120 mm 45 x 60 mm 45 x 57 mm 60 x 60 mm 57 x 42.5 mm
 57 x 57 mm 57 x 70 mm 57 x 78 mm 57 x 182 mm 24 x 65 mm 24 x 35 mm
 4" x 5" mm

Photographs: _____ **Prints:** _____



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Please complete ALL sections. Use "X" to select the appropriate checkbox and "N/A" if an answer is not applicable.

2. Sent Via:

a) Shipment:

Courier Name: _____ Tracking No.: _____

(Please ensure that your contact details are on all shipped media)

DVD: No. of DVD's:

CD: No. of CD's:

HDD: No. of HDD's:

b) Data Transfer:

FTP: (Please contact JaincoTech to set up an account)

JaincoTech Server

My Server Address:

Username: Password:

3. Requirements (Please indicate with an "X" and specify in detail)

Scanning

Resolution: 300 dpi Other _____

File size: 50 MB 75 MB Other _____

Scan type: 8-bit/channel 16-bit/channel Other _____

ICC Profile: Adobe RGB 1998 sRGB Other _____

File Naming:



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Please complete ALL sections. Use "X" to select the appropriate checkbox and "N/A" if an answer is not applicable.

Additional Instructions:

Color Correction

Cropping: Yes No Rotation: Yes No

Additional Instructions:

Dust Spotting & Scratch Removal

Magnification: 100% Other _____

Flatten Image: Yes No

Layered Image: Yes No

Additional Instructions:

4. Final Delivery:

a) Final File Format: JPEG & Compression _____
 PSD Flatten Or Layered
 TIFF Flatten Or Layered



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Please complete ALL sections. Use "X" to select the appropriate checkbox and "N/A" if an answer is not applicable.

b) Return Shipment Billing Method

Bill Me (Add to my invoice)

FedEx-Next Day (\$26)

FedEx-2 day (\$18)

US Mail 2-4 day (\$6)

Bill My Courier Account

Courier Name

Account Number

Next Day 2 days Other_____

I authorize JaincoTech to use my account above for returning materials.

5) Payment Method (Please select payment method)

Check
(Included with Batch)

PayPal
(An email link requesting payments will be sent within 12 hours of receiving the Order)

Visit <http://www.jaincotech.com/paymentmethod.htm> for additional billing and fee details

IMPORTANT

Please contact one of the JaincoTech representatives to confirm your order before sending the batch.

us@jaincotech.com