



**OFFICE PRODUCT VALUES Flyer
Order Form 2008**
(formerly called the VP16 flyer)

1st Quarter Order Deadline October 31, 2007
(Send In Completed Order Form and New Imprint Artwork By This Date)

Date: _____ I.S. Number: (required) _____ P.O. Number: _____
 Company: _____ Contact: _____
 Shipping Address: _____
 City: _____ State: _____ Zip: _____
 Phone: (____) _____ Fax: (____) _____
 Email Address: _____

Order Information
PLACE YOUR STANDING ORDER HERE, IF YOU CHOOSE

<p align="center">Total Quantity (Min 500, Multiples of 100) 500-999 = 27 ¢ ea. 1,000 and up = 25 ¢ ea. Plus Shipping</p>	Step 1				Step 2	
		Q1'08	Q2'08	Q3'08	Q4'08	Price Version (Check one)
	Order Qty: _____	_____	_____	_____	_____	<input type="checkbox"/> Version A
	Mailing Qty*: _____ <small>(MIN. 600)</small>	_____	_____	_____	_____	<input type="checkbox"/> Version W
	Ship to Dealer: _____	_____	_____	_____	_____	<input type="checkbox"/> Custom** (extra charge)
	Order Deadline: 10/20/07	1/20/08	4/20/08	7/20/08		

*If you plan to utilize OPMA in the mailing of these flyers, you will need to supply your list formatted as a CVS or text (tab or comma-delimited) file. Email your list to tcraig@opma.com. Direct Mail pieces will be delivered to the post office the week of the 20th prior to the start of each quarter, unless otherwise noted in the special handling instructions below.

****Custom-pricing file will be sent to you via email. You will have one week to do custom pricing and return to OPMA. Customize pricing on this flyer for \$460.00.**

Step 3	Step 4
Back Cover Imprint ONLY- 2 ¼" x 8 ¼" Rectangular Area Only	Dealer Bulk Mail Permit
<input type="checkbox"/> New artwork* to be sent to OPMA (\$45 charge) <input type="checkbox"/> Changes needed: faxed with order (\$45 charge) <input type="checkbox"/> Use artwork already on file with OPMA, AS IS. Imprint plate charge \$16.00 (each quarter); Imprint Run Charge: \$24.00/M (each quarter) <small>*300 dpi EPS or TIFF files only; we cannot accept Microsoft Word, Microsoft Publisher, JPEGs, or GIF files.</small>	<input type="checkbox"/> Yes (Please fill in below) Number : _____ City _____ ST ____ <small>(If direct mailed by OPMA, leave blank, mailing house's number will be used.)</small>

Proofing Policy: An order confirmation and imprint proof will be sent each time an order is received. You must sign and fax back all pages.

Special Handling Instructions: Please advise any special handling instructions you may require: _____

Send Orders, Artwork, and Direct Mail Information To:

Office Products Marketing & Advertising
 Attn: **Tami Craig** — tcraig@opma.com
 4211 North Division, Comstock Park, MI 49321
 Phone (616) 785-6061 x.54 ● FAX (616) 785-6070

OPMA is not responsible for incorrect art if notification is not received in this department prior to cut-off dates. I authorize the above and agree that my company will be responsible for any changes and/or debt incurred as a result of the fulfillment of this order.

AUTHORIZED DEALER SIGNATURE _____ **DATE** _____

Sale End Date will be indicated as the last day of each quarter.