



**Order Form for Tempus Gallery Albums (mount & bind)**

Send GP your prints with this completed order form. Keep in mind that up to 1/8" may be trimmed on three sides of each print. All adhesives used are archival quality. Turn-around time is three weeks. Follow these simple steps.

- ♦ Number all prints in album sequence (the order in which you would like them to appear in your finished album).
- ♦ The prints should be numbered on the back with a soft art pencil or other appropriate marking device.
- ♦ After the prints are numbered, place them in album sequence and then send them in with this form.
- ♦ If you are submitting laquered lab quality prints, please specify below.
- ♦ We must coat ALL inkjet prints in order to handle them properly. We CANNOT gild albums with injet prints.
- ♦ All prints will be textured unless otherwise requested below.

**Order Information:**

Date:	GP Account #:	GP Order#:
Studio Name:		
Contact Name:		
Billing Address:		
City:	State:	Zip:
Phone:	Fax:	
E-mail:		
Shipping Name:		
Shipping Address:		
City:	State:	Zip:
Ship Via: UPS Ground/UPS Air/Other _____ F.O.B. GP Albums		

**Print Information:**

**Please check box if you do not want prints textured.**

*Please circle one of each to indicate your preferences.*

<b>Type of prints submitted:</b>	standard lab prints	inkjet*	other _____
<b>Have prints already been coated:</b>	No	Yes (if yes, please specify _____)	
<i>*Please note that all inkjets must be double coated and album will come without gilding.</i>			

**Album Information:**

*Please circle one of each to indicate your preferences.*

<b>Customer Name/Order Number:</b>	
<b>Cover Style:</b>	
<b>Rectangular Sizes:</b> 11x14 10x13 8x10 5.5x7 5x7 4x5 10x8 7x5	<b>Square Sizes:</b> 12x12 10x10 8x8 5x5
<b>Page Color (seam color):</b> Black White	<b>Number of sides:</b> _____ (from 20 to 60)
<b>Cover Materials/Colors: Main Palette _____ OR Leather Palette _____ OR Fabric Palette _____</b>	
Select color from the Main Palette, Leather Palette or Fabric Palette on pages 34-35 of the catalog. Leather colors are an additional \$40.00.	

**Additional Albums:**

\_\_\_\_\_ **Replicas** - please note quantity/material/sizes/cover material/cover color - must be ordered at same time as original album to get replica pricing.

Please see the back of this form to add custom tooling, and for additional terms and payment instructions.

## Tempus Gallery Albums - mount & bind

### Optional Imprinting & Custom Tooling Information

*Please circle as needed to indicate your desired options.*

<b>Studio Imprint Inside Front Cover Bottom Center:</b> Silver Gold Blind Emboss None
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*If you would like a studio imprint, but do not have an imprint die on file, please contact GP Customer Service for more information.*

<b>Please add custom tooling:</b> YES NO 3-Letter Monogram <i>(use line one for monograms)</i>
<b>Position for tooling:</b> Lower Right Upper Center Bottom Center Inside Front Cover Bottom Center CUSTOM
<b>Custom tooling color:</b> Silver Gold Blind Embossed <i>(if applicable)</i>
<b>Tooling Style:</b> Script Block

<b>Line 1</b>	
<b>Line 2</b>	
<b>Line 3</b>	

*Please note that some cover materials with special patterns & fabrics cannot be custom tooled.*

### Order Amount

<b>Tempus Gallery Album (mount &amp; bind)</b>	\$ _____ <i>(see price list or call GP for pricing information)</i>
<b>Replica album(s) (mount &amp; bind)</b>	\$ _____ <i>(see price list or call GP for pricing information)</i>
<b>Custom Tooling (optional)</b>	\$ _____ <i>(\$7.00 per line includes setup and stamping)</i>
<b>Studio Imprint (optional)</b>	\$ _____ <i>(\$7.00 per line includes setup and stamping)</i>
<b>Coating charge (*double coating required on inkjet prints)</b>	\$ _____ <i>(\$18.00 per album)</i>
<b>ORDER TOTAL</b>	\$ _____ <i>(Shipping, handling &amp; insurance will be added to balance.)</i>

### Payment Instructions *Please select your payment method.*

*A 50% deposit (approximate) is due when submitting your order sheet and images on disk or FTP. The balance plus shipping and handling will be invoiced at time of shipment. The balance will be subject to the standard payment terms on your existing account.*

**Deposit payment information:** \_\_\_\_\_ **Check Enclosed** \_\_\_\_\_ **Credit Card**

Visa  
  MasterCard  
  Discover  
  American Express

*Please circle one if paying by credit card.*

<b>Card Holder:</b>	<b>Signature:</b>
<b>Card Number:</b>	
<b>Billing Address:</b>	
<b>Expiration:</b>	<b>3 or 4 digit Verification#:</b>

***Please send all correspondence and materials to:***

**GP ALBUMS**  
**Attn: TEMPUS GALLERY ALBUMS**  
 4045 N. Rockwell Street  
 Chicago, IL 60618-3797

**Phone: 800-888-1934/773-463-2424**  
**Fax: 800-436-7763/773-463-3028**  
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