



HOSPITAL APPLICATION GUIDE

****FREE SHIPPING ON ALL WEB ORDERS OVER \$59.00****

- FAST DELIVERY • INSTANT BILLING • ONE STOP SHOPPING •
- EXTRAORDINARY CUSTOMER SERVICE •
- ECO-FRIENDLY STAMPS • HIGH QUALITY PRODUCTS •
- DEAL DIRECT WITH THE MANUFACTURER •

www.jpcooke.com



XSTAMPER
STAMPS



SELF-INKING
STAMPS



GREEN STAMPS



DATER STAMPS



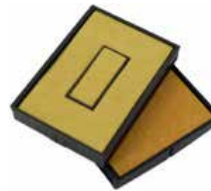
AUTOMATIC
NUMBERING
MACHINES



EMBOSSING
SEALS



FULL COLOR SUBLIMATION
NAME BADGES, DESK
& WALL SIGNS



REPLACEMENT
PADS



INK & ACCESSORIES



CCR Registered
CAGE: 6L669

J.P. COOKE® CO.



A Service Disabled Veteran Owned Small Business
Marking Products Since 1887

P.O. Box 3848 • 1311 Howard St.
Omaha, NE 68103
Ph. (800) 877-8267 & (402) 342-7175
National Fax: (800) 342-1260
Email: sales@jpcooke.com
Web: www.jpcooke.com



DUNS: 007276538 CAGE: 6L669
FED. ID #47-0132633
NAICS: 339943

SAMPLES OF POPULAR HOSPITAL STAMP IMPRESSIONS

2000 Self-Inking PLUS® Printer Line

Perfect for Fast Repetitive Use!

Available with Black, Red, Blue, or Violet Ink



-OR-

Xstamper™

Pre-Inked Stamps

50,000 initial impressions
Re-inkable • Laser Engraved
Designed for durability

Available with Black, Red, Blue, Green, Purple, or Orange



XSTAMPER N04 \$25.75
2000 PLUS PRINTER 10 \$21.00
Copy Area: 1/2" x 1-1/16" OR 3/8" x 1-1/16"

XSTAMPER N10 \$30.15
2000 PLUS PRINTER 20 \$22.45
Copy Area: 1/2" x 1-5/8" OR 9/16" x 1-1/2"

MEDIGAP

WORKER'S
COMP

SPECIMEN

ALLERGIC TO

PPO

HMO

SEND FILM
WITH PATIENT

SHANE TSAI, MD
CARDIOLOGY
DENVER, CO 80246

AUTHORIZATIONS
REVOKED

MEDI-CAL

Patient Counseling
 Yes No

ATTENTION:
MEDICAL RECORDS

PHCS

Need Copy of
FC and Cards

DIABETIC

Minnesota Children's Hospital
12345 Scott Street
St. Paul, MN 55101
(507) 123-4567

Jamie Flohr, MD
57389
888-1092

Amount Due

\$ _____

PHYSICIAN'S COPY

B. J. Fillman

Print For
Secondary

CREDIT

RETURN TO
BILLING AFTER
TREATMENT

MEDICAL
ALERT

PATIENT
SERVICES

PLEASE
PAY PATIENT

XSTAMPER N11 \$34.05
2000 PLUS PRINTER 30 \$23.50
Copy Area: 11/16" x 1-15/16" OR 3/4" x 1-7/8"

PHYSICIAN'S
COPY

PATIENT
FILE COPY

PLEASE PAY
FROM
STATEMENT

ABNORMAL
LAB TEST

XSTAMPER N05 \$25.15
2000 PLUS PRINTER 15 \$28.45
Copy Area: 1/8" x 2-3/8" OR 3/8" x 2-3/4"

Douglas County Medical Hospital

Do NOT Submit
To Medicare
We File For You

NAME ALERT

Date of Birth _____

Two Patients with Same Name

METHODIST PHYSICIANS CLINIC

PATIENT
INFORMATION

KEFLEX 500 mg
DISP: 30 (THIRTY) TAB
SIG: TAKE † TAB
Tid

WORKERS COMP. CLAIM

Univ. of Illinois, Miller School of Medicine

CONSULT PHARMACIST

DR. DALE L. BAHNER & ASSO., P.A.

MISSED APPOINTMENT Date _____

YOUR SUPPLEMENTAL
INSURANCE CO. HAS
BEEN BILLED.

CONFIDENTIAL
Not to be released
to a third party

X-STAMPS & 2000 PLUS

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Copy Area: 1/2" x 1-5/8" • 9/16" x 1-1/2"

MEDICARE	BS PPO	NEEDS TO BE FILED OUT	CHART THINNED ON _____
KAISER	CO-PAY	FLU VACCINE Date _____	BAD DEBT
HUMANA	MCNP	ATTENTION: MEDICAL RECORDS	MISSING ADDRESS INFORMATION
BLUE SHIELD	NO REFERRAL NEEDED	PREGNANT	NO EPINEPHRINE
AETNA	NO INSURANCE	ALLERGIC TO PENICILLIN	HYPERTENSION
BC/BS	CORRECTED CLAIM	COUMADIN PATIENT	CAPITATION
HIPPA	INSURANCE PENDING	Rh NEGATIVE	MANAGED CARE
D S P	CASH ONLY	SMOKER	MEDICAL ALERT
BO RLS	CANCELLED APPOINTMENT	PACEMAKER	ULTRASOUND
D N R	BROKEN APPOINTMENT	DIABETES PROGRAM	TRACER PREVIOUSLY
PRE-MED	SCANNED TO PHARMACY	NO KNOWN ALLERGIES	TIME IN: TIME OUT:

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XSTAMPER N12 \$40.25
2000 PLUS PRINTER 40 \$25.20
Copy Area: 1" x 2" OR 15/16" x 2-3/8"

VICODIN

Disp: 12
SIG: Take 1 or 2 Q
4 to 6 HRS PRN PAIN

Appt. Date _____
Referral Letter: _____
Send _____
Pick-up _____
Release x-rays _____

**RETURN TO
BILLING AFTER
TREATMENT**

TYLENOL #3

Disp: 16(sixteen) TABS
SIG: Take 1 or 2 TABS every
4 HRS PRN

PAY TO THE ORDER OF
Bank of Nebraska
FOR DEPOSIT ONLY
Eye Disease Clinic
of San Diego
12345-678984

HOLD

AMOXICILLIN 500 mgs

Disp: _____
Take 4 caps 1 HR prior to
appt.
Refill(s): _____

**SECOND SUBMISSION
ORIGINAL CLAIM
WAS SENT**
ON: _____

PATIENT NOTIFIED
____PHONE
____MAIL
DATE _____
INITIALS _____

ZITHROMAX "Z" PACK

SIG: Take 2 PO on day one
Then take 1 PO days 2-5
1 HR AC or 2 HR PC

ADVANCED DIRECTIVE

- Living Will
- Health Care Surrogate
- Durable Power of Attorney
- Other: _____

PHYSICIANS CLINIC
10060 REGENCY CIRCLE
OMAHA, NE 68114
402-354-1325

Allergic To:

- Drug Latex
- Food Other:

GP	
ASS GP	
NURSE	
SCANNED	
CODED	

**FOR PAPER
SHREDDER**

- Medicare HMO
- Medicaid PPO
- BC/BS Self Pay

COPY
FOR YOUR INFORMATION

**CONFIDENTIAL
MATERIAL
ENCLOSED**

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XSTAMPER N14 \$42.55
2000 PLUS PRINTER 25 \$32.70
Copy Area: 5/8" x 2-7/16" OR 5/8" x 3"

XSTAMPER N13 \$30.45
2000 PLUS PRINTER 30 \$23.50
Copy Area: 9/16" x 2" OR 3/4" x 1-7/8"

TRACER
PREVIOUSLY SUBMITTED FORM

McFarland Women's Center
9627 Oak View Avenue
Suite 904
Lafayette IN 47213
Ph: (804) 392-4751

PATIENT RECORD
CONFIDENTIAL

HIPAA
ACKNOWLEDGMENT
ON FILE

MEDICARE HAS BEEN BILLED

YOUR INSURANCE COMPANY
STATES THIS BALANCE IS
YOUR RESPONSIBILITY

MISSED
APPOINTMENT
ON

PEN V.K. 500 MG.
DISP. 28 (TWENTY-EIGHT) TABS.
SIG. TAKE 1 TAB. QID

X-RAY ENCLOSED
DO NOT BEND

DENIED PRE-MED

PRETREATMENT
ESTIMATE

WE HAVE RECEIVED YOUR MEDICARE
PAYMENT. YOU ARE RESPONSIBLE FOR
THIS BALANCE _____. PLEASE REMIT.

IMPORTANT
FORMS ENCLOSED

MEDICAL RECORDS ARE \$75
PREPAID. RECORDS WILL BE SENT
ONCE PAYMENT IS RECEIVED.

CONFIDENTIAL
Not to be released
to a third party

PAID Date _____
Chk. No. _____

DISMISSED

DEPARTMENTAL
DECISION

XSTAMPER N16 \$49.60
2000 PLUS PRINTER 50 \$30.15
Copy Area: 1/1/2" x 2-1/2" OR 1-1/4" x 2-3/4"

AGE _____
HT _____
WT _____
BP _____
P _____
TEMP _____
HGB _____
UA _____
PAIN _____
012345678910

PAID

CASH
 CHECK
 VOUCHER
 CREDIT

BY _____

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2000 PLUS PRINTER 50 \$30.15
 Copy Area: 1/1/2" x 2-1/2" OR 1-1/4" x 2-3/4"

PATIENT RESPONSIBILITY

- Deductible
- Non-Covered Services
- Too many services
- Co-Payment

PLEASE REMIT \$ _____
AS SOON AS POSSIBLE

CANCELLED OR MISSED APPT.

- For _____ On _____
 Date _____
- Patient Called By _____
 - Rescheduled On _____
 - Not Rescheduled

**ACTUAL DOCUMENT
 PLEASE TRACE AND
 CHANGE ORDER
 DO NOT DUPLICATE
 ORIGINAL ORDER**

RESULTS

WNL ___ ABN ___ PHYSICIAN _____
 INSTRUCTIONS _____

QV _____ FILE _____
 CALLED _____ LETTER _____ DATE _____

ALLERGY

**DO NOT MIX MEDICATION
 WITH ALCOHOL, OR
 DRIVE IF SEDATED**

Report reviewed by: _____
 Phone patient? yes _____ no _____
 Phoned to: _____
 Comments _____
 _____ by: _____
 Date/Time _____

- Medicare
- Medicaid
- BC/BS
- United HC
- Aetna
- Worker's Comp
- Self Pay
- Auto
- Kaiser
- Cigna
- Other: _____

I ATTEST THAT I HAVE VERIFIED ALL
 PRESCRIPTION INFORMATION ENTERED
 INTO THE COMPUTER ON MY SHIFT THIS
 DAY AND TO THE BEST OF MY KNOWLEDGE
 IT IS CORRECT AND ACCURATE

_____ RPH _____ DATE
 _____ RPH _____ DATE
 _____ RPH _____ DATE

DATE _____ INIT _____

HEALTH HISTORY REVIEWED	<input type="checkbox"/>
SOFT T/CANCER EX W.N.L.	<input type="checkbox"/>
PERIODONTAL EX. W.N.L.	<input type="checkbox"/>
TYPE I II III IV	

Nurse does Nurse does not
 need to accompany patient off
 unit floor for test(s) / procedure(s)

Date: _____

Initials: _____

HUMAN GROWTH HORMONE
 _____ **MG SUB Q**
INJECTION EVERY DAY

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-OR-

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XSTAMPER N18 \$46.45

2000 PLUS PRINTER 50 \$30.15

Copy Area: 15/16" x 2-13/16" OR 1-1/4" x 2-3/4"

XSTAMPER N49

\$37.00

2000 PLUS PRINTER R30

\$39.95

Copy Area: 1-3/16" OR 1-1/4"

PLEASE REMIT TO:
MAYVILLE GENERAL HOSPITAL
P.O. BOX 35478
MAYVILLE, NE 68274

YOUR HOSPITAL
Approved for Payment
Approved By _____ Date _____
Account # _____

**CONFIDENTIAL
INTERNAL USE ONLY**

DATE _____ TIME _____
CARECAST # _____
NAME _____

Do NOT write above this stamp.
Orders above have been scanned.
Signature: _____ User#: _____
Date: _____ Time: _____

Ibuprofen 800 mg TID (c food)
PRN #30
Do not use with history of
ulcer or gastric upset.



IMPORTANT: YOU MAY REMIT BY CREDIT CARD
NAME _____
ACCT. # _____ EXP. DATE _____
SIGNATURE _____
 VISA MASTERCARD AM/EXP. AMOUNT \$ _____

**Attention Staff
CO-PAY**
\$ _____
Collect at time of visit

XSTAMPER N56
\$40.95
2000 PLUS PRINTER Q24
\$29.45
Copy Area: 15/16" x 15/16"
OR 1" x 1"

**X - RAYS
DO NOT BEND**

**BALANCE DUE IS NOT
COVERED BY INSURANCE**
Please remit payment.

**Attention Staff
CO-PAY**
\$ _____
COLLECT AT TIME OF VISIT

**YOUR INSURANCE COMPANY HAS
PAID ITS SHARE OF YOUR BILL**
This statement is for the amount
payable directly by you.

**RATE YOUR PAIN
FROM 1 TO 10**
0 1 2 3 4 5 6 7 8 9 10

**INSURANCE
VERIFIED**
DATE _____
DATE _____
DATE _____

MEDICAL ALERT

INSURANCE VERIFIED
Date _____
Date _____
Date _____

Pronotal
Brevital
Versed
Dex
Dropericol
Fentanyl

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X-STAMPERS & 2000 PLUS

XSTAMPER N18 \$46.45

2000 PLUS PRINTER 50 \$30.15

Copy Area: 15/16" x 2-13/16" OR 1-1/4" x 2-3/4"

DEPT. OF SOCIAL & HEALTH SERVICES
PROVIDER SERVICE
P.O. BOX 3547 M/S LG-435
OLYMPIA, WASHINGTON 98504

**REISSUED
STATEMENT**

XSTAMPER N22 \$91.45

NO 2000 PLUS PRINTER AVAILABLE

Copy Area: 1-15/16" x 2-15/16"

Date: ___/___/___

MISSED APPOINTMENTS

Canceled Failed to Show

New Appt Made Follow up

Not Needed

Letter Sent

Date ___/___/___ Phone Call

Date ___/___/___

Instructions Given: _____

Dr's Sig: _____

Clerk or Nurses Sig: _____

XSTAMPER N24 \$79.75

2000 PLUS PRINTER 60 \$32.85

Copy Area: 1-3/16" x 3-1/8" OR 1-1/2" x 3"

I HAVE VIEWED THE DVD
AND UNDERSTAND MY
PROCEDURE AND IT'S RISKS

PATIENT SIGNATURE

Date Rcd: _____

Pt #: _____

C Loc: _____

Req #: _____

Date Comp & Init: _____

Spec Inst: _____

THIS TIME IS RESERVED EXCLUSIVELY
FOR YOU. WE RESERVE THE RIGHT TO
CHARGE FOR CANCELLED OR
RESCHEDULED APPOINTMENTS
WITHOUT 24 HOUR NOTICE.

XSTAMPER N26 \$50.25

2000 PLUS PRINTER 45 \$35.85

Copy Area: 11/16" x 3-5/16" OR 1" x 3-1/4"

PLEASE NOTIFY ON-CALL PHYSICIAN ON
POSITIVE RESULTS

Amanda M. Pierce

PROOF OF TIMELY FILING

XSTAMPER N57 (OVAL) \$46.80

2000 PLUS PRINTER 50 (RECTANGLE) \$30.15

Copy Area: 1-3/16" x 1-3/4" OR 1-1/4" x 2-3/4"



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XSTAMPER N12 \$40.25
2000 PLUS PRINTER 40 \$25.20
Copy Area: 1" x 2" OR 15/16" x 2-3/8"

**No Appointments
can be made
until the balance
shown on this
statement in paid.**

FINAL NOTICE
This is the last statement that
will be sent to you. Unless paid
at once your account will be
referred to the **credit bureau**
and **collection service**

THANK YOU for your
previous payment.
Reducing the balance
on a regular weekly or
monthly basis will be
greatly appreciated.

**MEDICARE HAS PAID ITS
SHARE OF YOUR BILL**
Please advise us of any
additional insurance
information or pay this
amount in full

**We arranged a payment
plan that you agreed to.**
**Please honor your
arrangement and pay
now. Thank you.**

**Your Insurance Co. has not paid
this claim because:**
 Deductible Taken
 Non-covered Service
 Insurance Cancelled
 Requested Information Not Received
Please remit payment in full.

**Whenever you require medical
attention you are given prompt
service.**
**Won't you please make
prompt payment on this long
overdue account?**

We've received no payment
from you since

**PLEASE SEND PAYMENT
TODAY TO SAFEGUARD
YOUR CREDIT.**

**YOUR INSURANCE
COMPANY HAS APPLIED
THESE CHARGES
TO YOUR
DEDUCTIBLE**

PLEASE...
Having to ask a good
patient for payment is not a
pleasant task; however,
your remittance would be
greatly appreciated.

Your account has been set up
on a payment plan.
Please pay plan amount of
\$ _____ per mo.
Thank You.

**Your insurance company
state this balance
is your responsibility
Please Remit Today!**

YOUR BALANCE DUE TO:
 Your Deductible
 Non-Covered Services
 Co-Pay
\$ _____

**Regular payments
must be made every
month in order to
maintain good credit.**

**Just a friendly
reminder**
that your account is
overdue. Won't your please
mail your remittance?

Your insurance
has been billed for you.
**YOUR SHARE
OF THIS BALANCE IS**
\$ _____

**WE MISSED YOUR
MONTHLY PAYMENT**
Won't you please
send it in now?

INSURANCE PENDING
\$ _____
AMOUNT DUE NOW
\$ _____

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XSTAMPER N11 \$34.05
2000 PLUS PRINTER 30 \$23.50

Copy Area: 11/16" x 1-15/16" OR 3/4" x 1-7/8"

PAST DUE
THIS ACCOUNT HAS NO DOUBT
ESCAPED YOUR NOTICE. WILL YOU
PLEASE SEND US A REMITTANCE.

**THIS IS A
FRIENDLY REMINDER**
This account is past due.
Your prompt attention is
courteously requested.

**PAYABLE
UPON RECEIPT
THANK YOU**

**YOUR REQUEST FOR CREDIT
WAS NOT IGNORED
THIS REQUEST FOR PAYMENT
SHOULD NOT BE EITHER.**

2nd REQUEST
We have to again remind
you of this overdue account.
PLEASE SEND YOUR CHECK TODAY

**PAST DUE
YOUR COOPERATION
WILL BE APPRECIATED**

XSTAMPER N12 \$40.25
2000 PLUS PRINTER 40 \$25.20

Copy Area: 1" x 2" OR 15/16" x 2-3/8"

OVERDUE
*Further Delay In
Payment Could
Impair Your Credit*

PAST DUE
*DID YOU FORGET?
PLEASE REMIT*

PRIORITY REQUEST
 SEND PAYMENT
 SEND PARTIAL
 CALL US

**ATTENTION:
ACCOUNT SERIOUSLY
OVERDUE**
Please remit payment in full
or call for a payment plan.

PLEASE NOTE:
A partial Payment...
of this past due account
will be a welcome expression
of your *GOOD* intentions.

ATTENTION
Your account is now 60 days
PAST DUE
Please call our office
to make arrangements
to clear up this account.



**DON'T YOU
THINK**
WE HAVE WAITED
LONG ENOUGH
FOR PAYMENT



PAST DUE
PLEASE REMIT TODAY
If there is some reason
why this bill has not been
paid please call us to discuss it.

**PLEASE
SETTLE** THIS SMALL ACCOUNT AT
ONCE AND AVOID US THE
EXPENSE OF SENDING
ANOTHER STATEMENT.
WE WOULD APPRECIATE
YOUR PAYMENT TODAY!

PAST DUE!
JUST WANTED TO REMIND YOU.



Please!
ALL ACCOUNTS ARE DUE
UPON RECEIPT OF STATEMENT.

**PLEASE PAY FROM
THIS INVOICE**
Thank You

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XSTAMPER N18 \$46.45
2000 PLUS PRINTER 50 \$30.15

Copy Area: 15/16" x 2-13/16" OR 1-1/4" x 2-3/4"

PAST DUE!

↳ This account has no doubt escaped your notice. May we please have your payment by return mail?

IMPORTANT! FINAL NOTICE

WE REGRET TO SAY, YOUR BILL IS 90 DAYS PAST DUE. IF NO ARRANGEMENTS ARE MADE IMMEDIATELY, IT WILL BE REFERRED TO OUR COLLECTOR. PLEASE CALL US TO AVOID THIS ACTION.

**We Accept
Mastercard - Visa - Discover
and American Express
PLEASE CALL US TO MAKE
ARRANGEMENTS FOR PAYMENT**

XSTAMPER N22 \$91.45
NO 2000 PLUS PRINTER AVAILABLE
Copy Area: 1-15/16" x 2-15/16"

FINAL DEMAND

The balance of this account is over 90 days past due. We have been courteous enough to extend you credit and hope that you will return the favor by taking care of this obligation promptly. Since sending statements is an expense, we will send you no more. We have suspended your credit pending payment of this obligation. If this account is unpaid by the 20th of this month, we will take legal steps to collect it. We sincerely hope that this won't be necessary. Thank you.

please



Don't Make Us
Get Tough!
Please Send
Us A Check!

THINK IT OVER

We are not complaining, but suppose we owed you \$ _____ since _____
WHAT WOULD YOU WANT US TO DO?

ATTENTION

Account is now over _____ days past due. Please call our office or remit your payment in full.

FINAL NOTICE!

Unless we receive your check in 10 days this account will be turned in for collection. **SORRY, BUT WE'VE ALREADY SENT SEVERAL "REMINDERS".**

**YOUR ACCOUNT HAS
BEEN TURNED OVER TO
OUR COLLECTION AGENCY!
Immediate Payment Can Stop This Action**

PAST DUE PLEASE REMIT AS SOON AS POSSIBLE

XSTAMPER N16 \$49.60
2000 PLUS PRINTER 50 \$30.15
Copy Area: 1/1/2" x 2-1/2" OR 1-1/4" x 2-3/4"

URGENT Legal Action is our next step.

**YOUR ACCOUNT MUST BE SETTLED IN FULL
Within 10 days or we will have no alternative but to place it in Outside Hands for collection. Please avoid the embarrassing and costly action.**

We
feel
TERRIBLE!



HAVING TO
REMINDE YOU!
WE NEED
TO BE PAID.

X-STAMPS & 2000 PLUS

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3 Stamps in one Holder to conserve space and save money!

\$74.10

N70 Spin 'N Stamp*

Copy Area: 1/2" x 1-5/8"

Choose 3 Custom Stamps to fit in the size below

COMMUNITY HOSPITAL
3433 LA GRANGE AVENUE
PORTLAND, OR 97236
(503) 336-7800

G. J. Fellman

FOR DEPOSIT ONLY
COMMUNITY HOSPITAL
ACCT. #2335-699-485

10-in-1 Phrase Stamp*

Copy Area: 3/16" x 1-1/2"

-Uses Refill Ink Cartridges

-Just turn the dial for any of these phrases

\$44.25



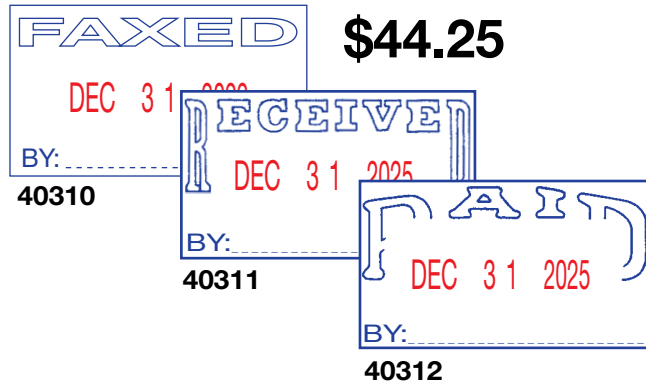
COMPLETED **FAXED**
CONFIDENTIAL **FILE COPY**
COPY **ORIGINAL**
DRAFT **PAID**
ENTERED **RECEIVED**

81041

81041

Stock Self-Inking Daters

Available with blue text, red dates and metal frame only



\$44.25

Pocket Stamps*

N40 and N42 Pocket Stamps are ideal for people on the go!

The folding case provides a compact yet sturdy design that won't leak in your pocket or purse!



N40 - \$30.45

Copy Area: 1/2" x 2"

DR. RICHARD R. KENNEDY
48772 EAST ADAMS STREET, STE. 324
SYRACUSE, NY 13202

N42 - \$40.80

Copy Area: 5/8" x 2-7/16"

Joseph Cardwell

J.P. COOKE CO.
www.jpcooke.com



*Available in Xstamper Only

2000 PLUS SELF INKING DATER CLASSIC AND EXPERT LINE

Both the Classic and Expert Line offer microban protection on an ergonomic handle to inhibit the growth of bacteria, a band shield to prevent inky fingers, an easy to change ink pad and a display window to easily identify your stamp!

The **Classic Line** offers a steel reinforced frame perfect for almost any application.



The **Expert Line** offers an all steel frame, for your heaviest stamping needs.

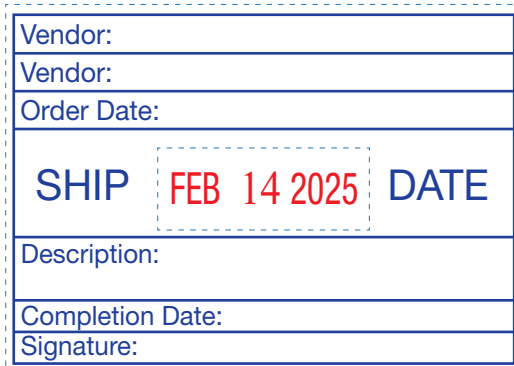
CLASSIC 2160 \$71.65 • **EXPERT** 3160 \$92.20
Copy Area: 1" x 1-5/8"



CLASSIC 2360 \$80.15 • **EXPERT** 3360 \$104.35
Copy Area: 1-1/4" x 1-13/16"



CLASSIC 2860 \$121.35 • **EXPERT** 3860 \$129.72
Copy Area: 2" x 2-3/4"



#1 DATE STAMP IN INDUSTRY!
HEAVY DUTY AND SELF INKING

Handle Infused with



to inhibit growth of bacteria



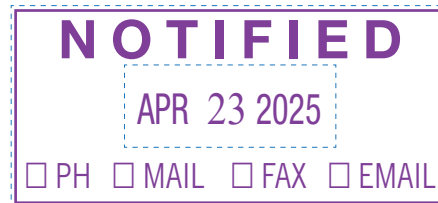
Band Shield



NO MESSY FINGERS!
All Daters Include Band Shield**
R 2045-6 \$85.65
Copy Area: 1-3/4"



CLASSIC 2460 \$84.75
Copy Area: 1-1/8" x 2-5/16"



CLASSIC 2660 \$90.75 • **EXPERT** 3660 \$103.67
Copy Area: 1-1/2" x 2-5/16"



2000 PLUS DATERS

J.P. COOKE CO.
www.jpcooke.com

PROFESSIONAL LINE

TRODAT DATERS



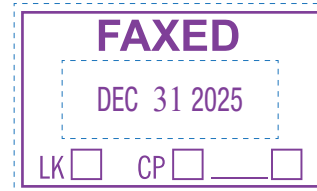
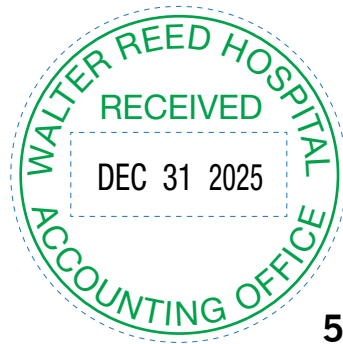
STAMPS FOR MAKING THE PERFECT DATE

The Professional Line is the ideal stamp for daily office use. It guarantees clean, precise imprints. For years it has stood for reliability and professionalism. Accurate workmanship and high quality materials make it an enduring champion in the Trodat product range.

The Trodat Professional Line also offers climate neutral stamps as their standard, ergonomic handles that give the greatest user comfort, reliability with the sturdy steel core, cleanliness with a band cover and simple date adjustment with comfortable rotating bands.

5415 DATER \$74.95
Copy Area: 1-3/4 Diameter

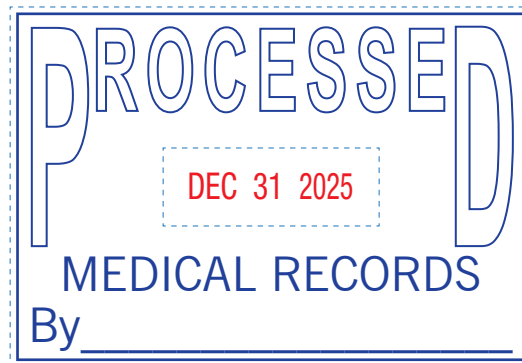
5430 DATER \$70.95
Copy Area: 1" X 1-5/8"



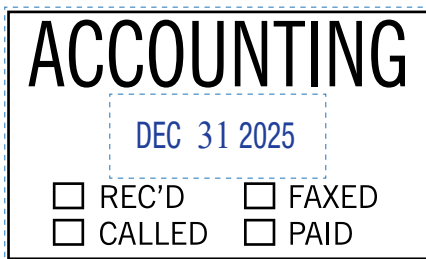
5440 DATER \$75.95
Copy Area: 1-1/8" X 2"



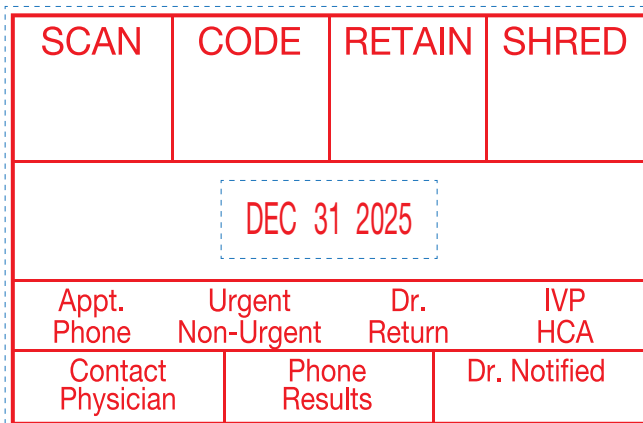
5480 DATER \$93.95
Copy Area: 2" X 2-3/4"



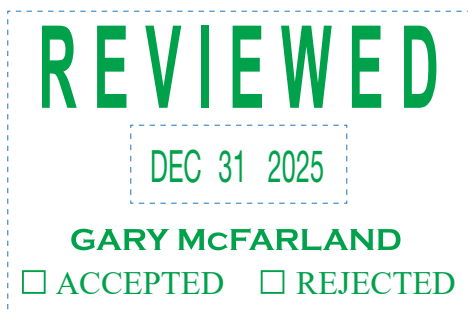
5460 DATER \$82.95
Copy Area: 1-5/16" X 2-1/4"



54110 DATER \$118.95
Copy Area: 2-5/32" X 3-5/16"



5470 DATER \$84.95
Copy Area: 1-9/16" X 2-3/8"



J.P. COOKE CO.
www.jpcooke.com

HEAVY METAL LINE

DATERS MADE FROM RECYCLED WATER BOTTLES

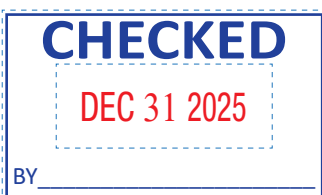


The Heavy Metal Line is sure to please. These daters minimize the used of plastic and maximize the metal with these newly designed daters. The majority of remaining plastic is made from recycled PET, thus using Shiny HM Daters help reduce the waste in landfills. Yes these are Heavy Metal Daters as the name implies, but super smooth oscillations make them easy to operate.

**ECO-FRIENDLY AND
TESTED FOR 1,000,000 IMPRESSIONS!**



SHINY HM-6100 DATER \$71.95
Copy Area: 15/16" X 1-5/8"



SHINY HM-6101 DATER \$72.95
Copy Area: 1-1/4" X 1-1/2"



SHINY HM-6103 DATER \$80.25
Copy Area: 1-3/16" X 2"



SHINY HM-6104 DATER \$84.85
Copy Area: 1" X 2-3/16"



SHINY HM-6106 DATER \$88.95
Copy Area: 1-5/16" X 2-3/16"



SHINY HM-6107 DATER \$92.95
Copy Area: 1-9/16" X 2-3/8"



SHINY HM-6108 DATER \$121.95
Copy Area: 1-7/8" X 2-5/8"



SHINY DATERS

J.P. COOKE CO.
www.jpcooke.com
15

PRINTER LINE

SHINY S-530 DATER \$53.95
Copy Area: 1-1/4" X 1-1/4"

The Shiny Printer Line daters are perfect for many applications. The quality is evident in the extremely smooth oscillations and quiet movement. You can't find self-inking daters with more attention to detail.



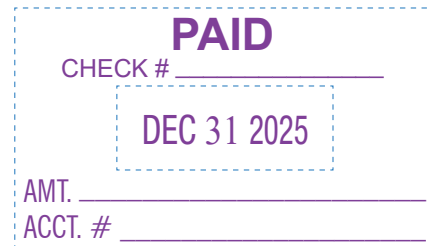
SHINY S-837 DATER \$61.95
Copy Area: 1-9/16" X 2"

SHINY S-542 DATER \$59.40
Copy Area: 1-5/8" X 1-5/8"



SHINY S-826 DATER \$52.95
Copy Area: 15/16" X 1-5/8"

SHINY S-829 DATER \$63.95
Copy Area: 1-9/16" X 2-1/2"

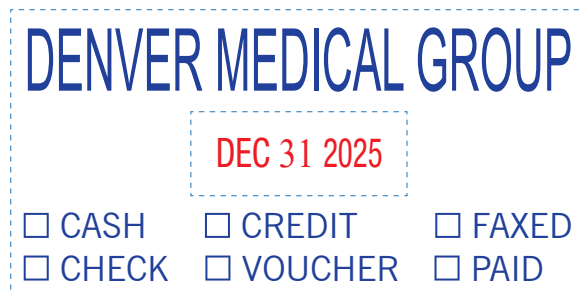


SHINY S-827 DATER \$53.45
Copy Area: 1-3/16" X 2"



SHINY S-830 DATER \$66.50
Copy Area: 1-1/2" X 3"

SHINY S-828 DATER \$61.95
Copy Area: 1-1/4" X 2-3/16"



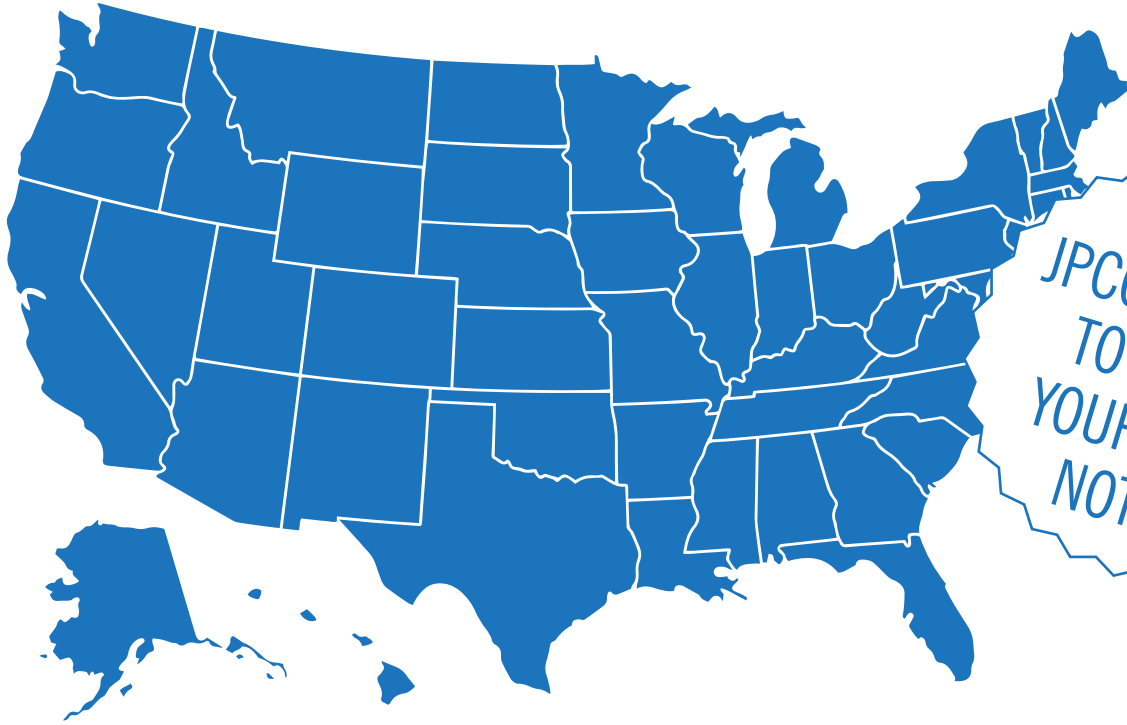
SHINY DATERS

J.P. COOKE CO.
www.jpcooke.com

NOTARY & PROFESSIONAL SUPPLIES FOR EVERY STATE!

NOTARIES FOR EVERY STATE

J.P. COOKE CO.
www.jpcooke.com



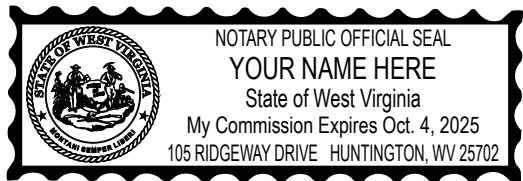
VISIT
JPCOOKE.COM
TO CHECK
YOUR STATE
NOTARY



N18 Desk Stamp
-Lifetime Guarantee!
-66% Recycled Content
-Pre-inked & Re-Inkable
-50,000 initial impressions



N42 Pocket Stamp
-Lifetime Guarantee!
-78% Recycled Content
-Pre-inked & Re-Inkable
-50,000 initial impressions



\$46.45



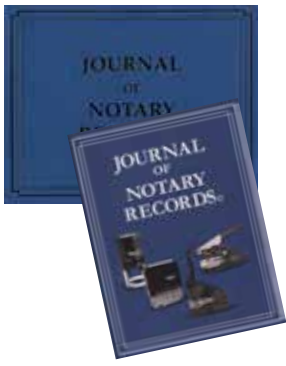
\$40.80

NOTARY JOURNALS

Protect yourself by maintaining detailed Records of your official acts as a notary in our notary journals. Two different sizes available. Both books have space for detailed records and thumb prints.



2000 Plus Printer 50
-Microban Infused Handle
-Easy to change ink pad
-Thousands of crisp impressions
-Perfect for fast repetitive use!

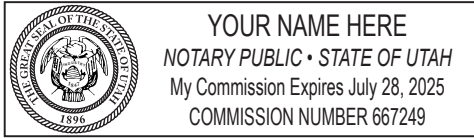


LARGE
141 page book for over 500 entries.

\$39.75

MEDIUM
72 page book for 200 entries

\$18.00



\$30.15

***ALL SIZES AND PRICES MAY VARY SLIGHTLY DUE TO STATE REQUIREMENTS**

NAME BADGES

PLASTIC NAME BADGES

- Available in three sizes **J11, J12, J13** •
- Plastic in the color of your choice •

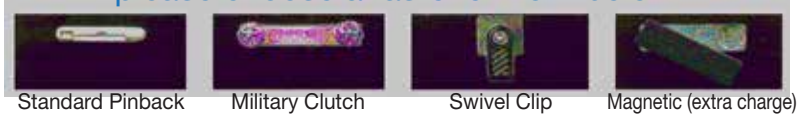


METAL NAME BADGES

- Available in two sizes **J50** and **J51** •
- Choice of Silver or Gold metal •



For **J11, J12, and J13** name badges, please choose a fastener from below.



The Standard Pinback will be used unless otherwise noted. Magnetic fasteners available for extra charge.

ITEM NO.	DESCRIPTION	#OF LINES	PRICE
J11	3/4" X 3"	2	8.65EA
J12	1" X 3"	3	11.30EA
J13	1-1/2" X 3"	3	15.35EA
J50	5/8" X 3"	2	22.85EA
J51	5/8 X 3"	2	22.85EA
73904	Magnetic Fastener	-	4.25EA

** **J50** and **J51** only available with Military Clutch Fastener

STANDARD ALUMINUM

- Available in Gold, Silver or Black Aluminum Holder •
- Plastic name plate in the color of your choice •

ITEM NO.	DESCRIPTION	SIZE	PRICE
K30	Standard Gold Holder	2" X 8"	22.85 EA
K31	Standard Silver Holder	2" X 8"	22.85 EA
K32	Standard Black Holder	2" X 8"	22.85 EA
K35	Standard Gold Holder	2" X 10"	27.45 EA
K36	Standard Silver Holder	2" X 10"	27.45 EA
K37	Standard Black Holder	2" X 10"	27.45 EA

DESK SIGNS



Profile View

PLASTIC NAME ON WOOD

- Available in two sizes •
- Plastic name plate in the color of your choice •

K80	Sign Plate	2" X 8"	35.40 EA
K81	Sign Plate	2" X 10"	41.90 EA



Profile View

DESIGNER DESK SIGNS

- Available in two sizes •
- Plastic name plate in the color of your choice •

K20	Name Plate w/ Black Holder	2" X 8"	28.85 EA
K24	Name Plate w/ Black Holder	2" X 10"	32.70 EA



Profile View

WE SELL WALL SIGNS TOO!

Just visit JPCooke.com to see the full line of custom signs!

To view the most popular PLASTIC COLORS

See the Chart at the end of this catalog!
 If your color is not there, please contact us.
 We have over 40 color choices to match your office decor!
 If you need a special color match, provide sample and specifications to your sales rep.

SUBLIMATED FULL-COLOR NAME BADGES

SUBLIMATED BADGES

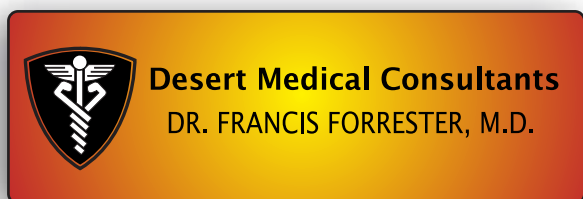


Item #SUB15 • 1½" x 3"

Shown with optional Frame. Frames are available in Gold, Silver, or Black. Add \$1.50 Suggested Retail for Frame.



Item #SUBOV • 1½" x 3" Oval



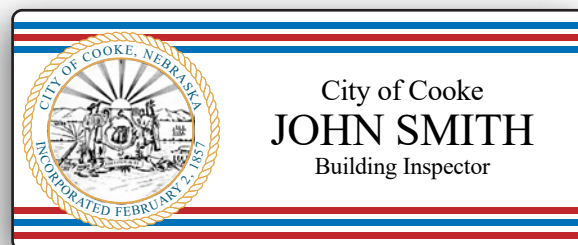
Item #SUB13 • 1" x 3"



Item #SUB23 • 2" x 3"



Item #SUB15 • 1½" x 3"



Item #SUB125 • 1¼" x 3"

Item #	Size	Qty 1 thru 10	Qty 11 thru 24	Qty 25 thru 100
SUB13	1" x 3"	\$16.55	\$14.10	\$12.00
SUB125	1¼" x 3"	\$17.90	\$15.25	\$12.90
SUB15	1½" x 3"	\$20.75	\$17.60	\$14.95
SUB23	2" x 3"	\$22.10	\$18.75	\$15.95
SUBOV	1½" x 3"	\$22.10	\$18.75	\$15.95

Above price includes a Safety Pin Fastener. For a Magnetic Fastener add \$4.25 per badge.

No Set-Up Fees. Digital Artwork for logo is required in either a .tif, .jpg, .eps or .pdf at least 300 dpi for best results.

J.P. COOKE CO.
www.jpcooke.com

XSTAMPER STOCK STAMPS

Our signature mount with today's most common one-color title impressions. Many more titles available from your sales rep if you don't see what you need here. As always, each stamp is re-inkable and guaranteed for life!



IMPRESSION SIZE: 1/2" X 1-5/8"

\$12.50ea

The color shown is the only color available unless a custom stamp is ordered.

APPROVED

1008

INSURANCE
VERIFIED

1633

FINAL NOTICE

1014

PLEASE FORWARD
ATTENDING PHYSICIAN'S
INSURANCE FORM

1627

SECOND NOTICE

1012

PATIENT'S SIGNATURE
ON FILE

1625

PLEASE PAY NOW
WE DO NOT SEND
STATEMENTS

1624

YOUR INSURANCE HAS
PAID THEIR PORTION
BALANCE DUE IN 30 DAYS

1623

PHYSICAL DUE

1631

CANCELLED

1119

ADMITTED

1623

ORIGINAL

1111

OFFICE COPY
DO NOT REMOVE

1634

MAILED

1218

RUSH

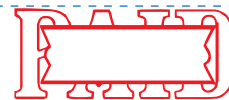
1834

ALLERGIES

1629

BENEFITS
ASSIGNED

1632



1014

CONFIDENTIAL

1130

NON-SMOKER

1630

FAXED ON: _ / _ / _
by:

1820

VOID

1825

E-MAILED

1650

FILE

1051

COPY

1006

COMPLETED

1026

X-RAYS

1626

URGENT

1103

SCANNED

1829

FYI

1361

STOCK STAMPS

J.P. COOKE CO.
www.jpcooke.com



XSTAMPER STOCK STAMPS

Our signature mount with today's most common one-color title impressions. Many more titles available from your sales rep if you don't see what you need here. As always, each stamp is re-inkable and guaranteed for life!



The color shown is the only color available unless a custom stamp is ordered.

Small Round Stamps

\$9.99ea



11407



11411



11415



11408



11363



11413



11418



11414



11359



11409



11357



11364

Automatic Numbering Machine

- Self Inking
- Black Inked
- Auto Advance



40240 \$77.50

123456

40242 \$82.95

1234567

40244 \$110.95

12345678

40246 \$144.25

1234567890

40248 \$166.25

123456789012

Stock Self-Inking Line Daters



40160 \$17.50
Plastic Frame Type size 1.5
• 4-year line dater • Black

DEC 31 2025



40150 \$36.50
Metal Frame Type size 1.5
• 10-year line dater • Black

DEC 31 2025

Obscure private information **permanently**

SECURE STAMPER & MARKER

Protect yourself with our secure stamper & marker! Special black ink obscures private information and is perfect for hiding personal data on mail and in documents. Covered information can not be easily read, scanned or copied.

GO TO WWW.JPCOOKE.COM FOR MORE INFORMATION!

Hide a block of information such as a name and address with 1 impression



\$12.85ea 35300 - Impression area: 13 x 42mm (1/2" x 1-5/8")

OR

\$19.45ea 35301 - Impression area: 24 x 71mm (15/16" x 2-13/16")

Available in black ink



Secure Marker in use



Secure Stamp in use

Conceal sensitive information and leave needed data readable



\$5.20ea

With ordinary marker ink, carbon often floats to the top after the ink dries, which makes original text readable again because of light reflection. New secure marker ink formula minimizes this phenomenon to obscure information.

35305

2.0 - 4.0mm (Writing width) • Acrylic fiber tip • Chisel style

Available in black ink

STOCK STAMPS

J.P. COOKE CO.
www.jpcooke.com



Xstamper®

THERE JUST MADE BETTER™
 YOU'LL NEVER HAVE TO BUY THE SAME STAMP TWICE!
NUMBER 1 BRAND STAMP IN USA!

ITEM	DESCRIPTION	COLOR	PRICE
22111	10ml Bottle	Red	\$ 6.29
22112	10ml Bottle	Black	\$ 6.29
22113	10ml Bottle	Blue	\$ 6.29
22114	10ml Bottle	Green	\$ 6.29
22115	10ml Bottle	Purple	\$ 6.29
22116	10ml Bottle	Orange	\$ 6.29
22118	10ml Bottle	Pink	\$ 6.29
22119	10ml Bottle	Lt. Blue	\$ 6.29

For larger bottles visit our website
www.jpcooke.com

**MAKE SURE TO ALWAYS USE
 XSTAMPER INK REFILLS TO INSURE
 THE LONG LIFE OF YOUR STAMP!**

EASY RE-INKING
 IT'S EASY TO RE-INK AN XSTAMPER!
 WITH MOST MODELS, SIMPLY REMOVE
 THE HANDLE AND PLACE A FEW
 DROPS OF INK IN THE OPENINGS.
 COMPLETE RE-INKING INSTRUCTIONS
 ARE ENCLOSED WITH EVERY XSTAMPER!



Premier Mark™



ITEM	DESCRIPTION	COLOR	PRICE
40711	2oz Bottle	Red	\$ 9.00
40712	2oz Bottle	Black	\$ 9.00
40713	2oz Bottle	Blue	\$ 9.00
40714	2oz Bottle	Green	\$ 9.00
40715	2oz Bottle	Purple	\$ 9.00

For larger bottles or replacement pads
 visit our website
www.jpcooke.com

PRINTER LINE STOCK PADS (1COLOR)

P-10 Pad	\$ 9.90
P-12 Pad	\$ 9.90
P-15 Pad	\$ 9.90
P-20 Pad	\$ 9.90
P-25 Pad	\$ 9.90
P-30 Pad	\$ 9.90
P-40 Pad	\$ 9.90
P-45 Pad	\$ 9.90
P-50 Pad	\$ 9.90
P-60 Pad	\$ 9.90
Q-17 Pad	\$ 9.90
Q-24 Pad	\$ 9.90

DATE STAMPS CLASSIC LINE PADS

DATER NO.	1 COLOR	2 COLOR
2160 Pad	\$ 9.90	\$ 10.95
2360 Pad	\$ 9.90	\$ 10.95
2460 Pad	\$ 9.90	\$ 12.00
2660 Pad	\$ 9.90	\$ 12.00
2860 Pad	\$ 9.90	\$ 12.00

R-17 Pad	\$ 9.90
R-24 Pad	\$ 9.90
R-30 Pad	\$ 9.90
R-40 Pad	\$ 9.90

NEED REPLACEMENT PADS??

We carry replacement pads for almost
 every brand of self-inker.
 Just refer to the number on the stamp
 handle & specify pad color.

RE-INKING & REFILLS

J.P. COOKE CO.
www.jpcooke.com



2000 PLUS[®] PRINTER SERIES

ITEM NO.	TYPE	DESCRIPTION	MAX # OF LINES	SIZE	PRICE
PRINTER 10	Self Inking	Plastic Construction	3	3/8" X 1-1/16"	\$21.00EA
PRINTER 15	Self Inking	Plastic Construction	3	3/8" X 2-3/4"	\$28.45EA
PRINTER 20	Self Inking	Plastic Construction	4	9/16" X 1-1/2"	\$22.45EA
PRINTER 25	Self Inking	Plastic Construction	5	5/8" X 3"	\$32.70EA
PRINTER 30	Self Inking	Plastic Construction	5	3/4" X 1-7/8"	\$23.50EA
PRINTER 40	Self Inking	Plastic Construction	6	15/16 X 2-3/8"	\$25.20EA
PRINTER 45	Self Inking	Plastic Construction	7	1" X 3-1/4"	\$35.85EA
PRINTER 50	Self Inking	Plastic Construction	8	1 1/4" X 2-3/4"	\$30.15EA

2000 PLUS[®] HEAVY DUTY DATERS

ITEM NO.	TYPE	DESCRIPTION	MAX # OF LINES	SIZE	PRICE
2160	Self Inking Dater *	Heavy Duty Metal	4	1" X 1-5/8"	\$71.65EA
2360	Self Inking Dater *	Heavy Duty Metal	5	1 1/4" X 1-13/16"	\$80.15EA
2460	Self Inking Dater *	Heavy Duty Metal	5	1-1/8" X 2-15/16"	\$84.75EA
2660	Self Inking Dater *	Heavy Duty Metal	7	1-1/2" X 2-5/16"	\$90.75EA
2860	Self Inking Dater *	Heavy Duty Metal	9	2" X 2-3/4"	\$121.35EA
R 2045 6	Self Inking Dater *	Heavy Duty Metal (Round)	6	1-3/4" Diameter	\$85.65EA
3160	Self Inking Dater *	Expert Line - All Steel	4	1" X 1-5/8"	\$92.20EA
3360	Self Inking Dater *	Expert Line - All Steel	5	1-1/4" X 1-13/16"	\$104.35EA

* Available in 1 and 2 Color Pad Impressions **Excludes R20456

Xstamper[®] CUSTOM STAMPS

ITEM NO.	TYPE	% RECYCLED	MAX # OF LINES	SIZE	PRICE
N04	Pre-Inked	67%	4	1/2" X 1-1/16"	\$25.75EA
N05	Pre-Inked	76%	1	1/8" X 2-3/8"	\$25.15EA
N10	Pre-Inked	65%	4	1/2" X 1-5/8"	\$30.15EA
N11	Pre-Inked	63%	6	11/16" X 1-15/16"	\$34.05EA
N12	Pre-Inked	58%	9	1" X 2"	\$40.25EA
N13	Pre-Inked	64%	5	9/16" X 2"	\$30.45EA
N14	Pre-Inked	66%	5	5/8" X 2-7/16"	\$42.55EA
N16	Pre-Inked	55%	13	1-1/2" X 2-1/2"	\$49.60EA
N18	Pre-Inked	64%	7	15/16" X 2-13/16"	\$46.45EA
N20	Pre-Inked	53%	7	15/16" X 2-13/16"	\$50.20EA
N22	Pre-Inked	65%	17	1-15/16" X 2-15/16"	\$91.45EA
N24	Pre-Inked	54%	10	1-3/16" X 3-1/8"	\$79.75EA
N26	Pre-Inked	64%	6	11/16" X 3-5/16"	\$50.25EA
N27	Pre-Inked	65%	13	1-9/16" X 3-15/16"	\$102.75EA
N28	Pre-Inked	61%	27	2-9/16" X 3-15/16"	\$114.00EA
N32	Pre-Inked	68%	3	5/8" Diameter	\$26.20EA
N48	Pre-Inked	60%	3	3/4" Diameter	\$31.05EA
N49	Pre-Inked	56%	5	1-3/16" Diameter	\$37.00EA
N51	Pre-Inked	58%	4	1" Diameter	\$32.40EA
N52	Pre-Inked	64%	12	1-15/16" Diameter	\$65.05EA
N53	Pre-Inked	52%	7	1-9/16" Diameter	\$52.75EA
N56	Pre-Inked	58%	8	15/16" X 15/16"	\$40.95EA
N57	Pre-Inked	55%	6	1-3/16" X 1-3/4"	\$46.80EA

PRICE LISTS

J.P. COOKE CO.
www.jpcooke.com

COPY THIS FORM FOR FUTURE ORDERS

STAMP ORDER FORM

FAX TO 1-800-342-1260 OR MAIL

J.P. Cooke® Company • 1311 Howard Street
P.O. Box 3848 • Omaha, NE 68103



J.P. COOKE®

A Service Disabled Veteran Owned Small Business

Ph: (800) 877-8267 & (402) 342-7175

Date _____ P.O. # _____

PAYMENT METHOD: Bill Me Check Enclosed # _____

Charge VISA MC AMEX DISC
Card# _____ Exp. _____ Security # _____

Ordered By:	Name _____	Ship To: (if different)	Name _____
	Address _____		Address _____
	Address _____		City, State, Zip _____
	City, State, Zip _____		Phone Number _____ Fax Number _____
	Phone Number _____ Fax Number _____ () ()		
	<input type="checkbox"/> Email Invoice to: _____		DUNS: 007276538 - CAGE: 6L669 - FED. ID #47-0132633 - NAICS: 339943

Quantity	Color	Mount Size	Stamp Sample, Type or Print Clearly Desired Copy
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Shipping Charges (Continental U.S. / APO/FPO)

Please add Sales Tax. Also add Postage & Handling
@ Rate of 1 Stamp @ \$4.45, 2 Stamps @ \$5.50,
3 Stamps @ \$6.55, 4 Stamps @ \$7.80, 5 Stamps @ \$9.40,
6 or more Stamps @ \$10.25

List Stock items needed here		
Stock Number	Quantity	Stock Number

Note: Signatures must be written actual size in black ink on separate unlined white paper and attached. For logos and artwork, attach exact size of original black and white camera-ready art. Photocopies or faxes of artwork cannot be accepted. If style # or instructions are not provided, we will use our discretion to make the best finished product.

XSTAMPER REFILL INK

Quantity _____

Size 10ml 20ml 60ml
\$6.29 \$9.70 \$23.95

Color Red Black Purple
 Blue Green

SELF-INKING & RUBBER STAMP INK

Quantity _____

Size 2oz - \$9.00

Color Red Black Purple
 Brown Blue Green

2000 PLUS PRINTER LINE REPLACEMENT PADS			
PRINTER 10	\$9.90	PRINTER 40	\$9.90
PRINTER 15	\$9.90	PRINTER 45	\$9.90
PRINTER 20	\$9.90	PRINTER 50	\$9.90
PRINTER 25	\$9.90	PRINTER 60	\$9.90
PRINTER 30	\$9.90		
2000 PLUS DATER 2-COLOR REPLACEMENT PADS			
2160	\$10.95	2460	\$12.00
2360	\$10.95	2660	\$12.00
		2860	\$12.00
		SALES REP	

PLEASE GO TO WWW.JPCOOKE.COM FOR EASY ORDERING

Please photocopy order form for your convenience

Custom-Made Product Order Form

J.P. Cooke Company

Order Date: _____ P.O. Number: _____
(NOT REQUIRED)

Your Phone Number: _____

Your Fax Number: _____

SHIP TO ADDRESS

Business Name

Address

City, State, Zip

Your Name

EMAIL: SALES@JPCOOKE.COM

FAX TO: 1-800-342-1260 OR MAIL TO:

J.P. Cooke Company • 1311 Howard St.

P.O. Box 3848 • Omaha, NE 68102

Phone: (402) 342-7175

(800) 877-8267

QUANTITY

ITEM

STYLE

PRODUCTION INSTRUCTIONS PLEASE CHECK ALL THAT APPLY

- | | | |
|---|-----------------------------------|--|
| <input type="radio"/> exactly as chosen | <input type="radio"/> fill stamp | <input type="radio"/> centered |
| <input type="radio"/> per sample | <input type="radio"/> caps | <input type="radio"/> flush left |
| <input type="radio"/> shrink to fit | <input type="radio"/> upper/lower | <input type="radio"/> justified (left & right) |
| | | <input type="radio"/> add border |

If not marked, ONE will be made.

If not marked, we will use our discretion to make the best finished product.

ENGRAVED PRODUCTS

Includes desk signs, wall & door signs and badges.

CUSTOM SIZE (If applicable - face size only)

_____ X _____
height length

PLASTIC COLOR _____

LETTER COLOR _____

WALL or DOOR SIGN MOUNTING

- | | |
|---|---|
| <input type="radio"/> clear adhesive (on front) | <input type="radio"/> suction cups |
| <input type="radio"/> double sided tape (on back) | <input type="radio"/> screw holes |
| <input type="radio"/> velcro | <input type="radio"/> wire clip (fabric partitions) |
| <input type="radio"/> magnetic tape | <input type="radio"/> none |

If not marked, DOUBLE-SIDED TAPE will be sent

NAME BADGE FASTENER SELECTION

- standard pinback military clutch swivel clip
 magnetic (additional charge)

If not marked, STANDARD PINBACK will be used.

Guidelines for Submitting Artwork

- FOR LOGOS AND ARTWORK - Attach original black and white camera-ready art. Photocopies, faxes, or business cards are not acceptable.
- Provide clean black and white sketch for Seals and for copy placement.

- CUSTOM ORDERS cannot be changed or cancelled.
- IF NO SPECIAL INSTRUCTIONS OR STYLE #'s are given, we will use our discretion to make the best finished product.

E-Mail Artwork Guidelines

- ALL DIGITAL ART must be 300-600 dpi black and white bitmap (no grayscale), in TIFF or PDF format. All PDFs must include fonts or have all text turned to outline (i.e. we may not have your font).
- INCLUDE P.O. or Control # with all e-mailed artwork.

COPY Please print clearly - sketch required for seals, name badges and signs.

SPECIAL INSTRUCTIONS

NEED HELP ORDERING? PLEASE CONTACT YOUR SALES REP OR CALL OUR FRIENDLY CUSTOMER SERVICE AT 1-800-877-8267