

# ACME BOOKBINDING

100 Cambridge St. P.O. Box 290699 Charelstown, MA 02129-0212 Phone (617) 242-1100 Fax (617) 242-3764

## DEMAND BINDING QUOTATION REQUEST

Company/Institution: \_\_\_\_\_ Date: \_\_\_\_\_  
Account #: \_\_\_\_\_ Contact: \_\_\_\_\_ Email: \_\_\_\_\_  
Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_  
Title: \_\_\_\_\_ Quantity: \_\_\_\_\_

### ***PLEASE NOTE***

*All materials sent for Demand Binding should be collated single sheets with colored slip sheets separating each book. Text should be positioned to the binding side and centered top to bottom on the page with allowance for at least 1/8 inch trim from the top, front, and bottom. The front of the book will be trimmed to the final size specified. The back or spine of the book will milled 1/16 inch. See sample text sheet with trim notation.*

Trim: Head Trim: \_\_\_\_\_ Width: \_\_\_\_\_ Height: \_\_\_\_\_ Oblong: \_\_\_\_\_ Upright: \_\_\_\_\_  
Number of Pages: \_\_\_\_\_ Thickness: \_\_\_\_\_ Paper Description: \_\_\_\_\_  
Endpapers: Acme White: \_\_\_\_\_ Acme Off White: \_\_\_\_\_ Other: \_\_\_\_\_ Describe: \_\_\_\_\_  
Style of Back: Flat: \_\_\_\_\_ Round (Extra Charge): \_\_\_\_\_  
Binder's Board Caliper: Acme's Choice (Match To Book): \_\_\_\_\_ Other: \_\_\_\_\_ Describe: \_\_\_\_\_  
Headbands: No: \_\_\_\_\_ Yes (Extra Charge): \_\_\_\_\_ Color: White: \_\_\_\_\_ Other: \_\_\_\_\_ Specify: \_\_\_\_\_  
Printed & Film Laminated Paper Cover: (Customer Supplied) Yes: \_\_\_\_\_ No: \_\_\_\_\_  
*Please Request an Instruction Sheet for Laying Out Printed Paper Covers.*  
Cloth Cover, Color and Number: \_\_\_\_\_  
Cover Stamping: Die Stamping: \_\_\_\_\_ Linotype: \_\_\_\_\_ No Stamping: \_\_\_\_\_  
Front: \_\_\_\_\_ Spine: \_\_\_\_\_ Back: \_\_\_\_\_ Sq. In. Coverage: \_\_\_\_\_  
Dies: Cust. Supply: \_\_\_\_\_ Acme Supply: \_\_\_\_\_ No Dies: \_\_\_\_\_ Die Metal: Magnesium: \_\_\_\_\_ Copper: \_\_\_\_\_ Brass: \_\_\_\_\_ None: \_\_\_\_\_  
*Customer Must Supply Camera-Ready Art Work or Film if Acme is to Make Dies.*  
Foil: Number(s) and Color(s): \_\_\_\_\_  
Shrink Wrap: No: \_\_\_\_\_ Yes: \_\_\_\_\_ Jackets (Customer Supplied): No: \_\_\_\_\_ Yes: \_\_\_\_\_  
Packing: Bulk: \_\_\_\_\_ Single Wall: \_\_\_\_\_ Double Wall: \_\_\_\_\_  
Special Instructions: \_\_\_\_\_