

PAPER PROOF APPROVAL REQUEST

P.O.#: 106671WIL

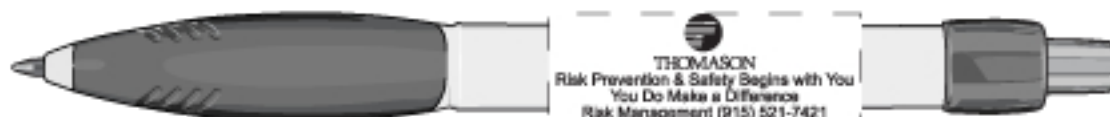
ITEM #: PEN JASMINE GEL BLACK PROOF # 1

IMPRINT COLOR: DARK BLUE IMP BBL BACKSIDE A

Below or attached is a paper proof for your approval, or revision if necessary. Please check for discrepancies. Production will start upon approval.

NOTES: The art as you originally sent would not work. The bottom 3 lines of text were far too small to be legible when printed. On the layout below, we shrunk the logo and enlarged the 3 lines of type to the minimum size requirement for legibility.

Top Actual Size and Location, Bottom Enlarged for Clarity




THOMASON
Risk Prevention & Safety Begins with You
You Do Make a Difference
Risk Management (915) 521-7421

Please select from the following:

- PROOF APPROVED AS IS
 REVISION, NEED ANOTHER PROOF
 PROOF APPROVED WITH CHANGE
 OTHER

This box is 1 square inch. If box measures smaller, your fax machine has reduced the actual size of copy shown above.



SIGNATURE _____ DATE _____

PLEASE FAX BACK YOUR REPLAY TO NUMBER ON PAGE ONE

NO CREDIT WILL BE ISSUED FOR ANY ART ERRORS AFTER PROOF APPROVAL