

Multimedia

*Publishing &
Packaging Inc.*

Date: _____

Customer: _____

Printing Release Form

I/we will not be able to be present for a Press Check at the scheduled time for

Job No: _____ and description _____

Therefore, in order for me to benefit from an expedited schedule, I hereby authorize Multi-Media Publishing & Packaging, Inc. or its agent, using normally acceptable levels of craftsmanship, to approve and direct production of the print job on my/our behalf. I will abide by their decisions as though they were my/our own.

Special instructions:

Signed

Position

Representing

*818-341-7484
818-341-2807 fax*

www.mmppinc.com