

Customer Information:

Company Name: _____ Contact Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Fax Number: _____

E-mail address: _____

Instructions:

1. Complete this application.
2. E-mail / Fax / Mail - Your document along with this application to:

E-mail: orders@pdf-fillableforms.com

or

Mail: Class Act PDF
P.O. Box 711509
Santee, Ca 92072

or

Fax: 1-619-584-7407

3. Once we receive your order, we will send you an estimate for our services (free of charge).
4. Once you approve the estimate, we will convert your submitted document to PDF per your request described below, and a copy will be sent to you for your approval. (This copy will be for review only; the printing/saving function will be blocked.)
5. Once we receive payment for our services, we will email you a final copy with all restrictions removed.

Section 1: Electronic Documents- Use this section only if you submitting a electronic document via e-mail.
e.g.,(Word, WordPerfect, Excel, Powerpoint, existing PDF...)

A. Convert document into a PDF? Yes No

B. Make document a searchable PDF? Yes No

C. Add Form Fields? Yes No

D. Make Form Savable in Reader 7 or Reader 8? Yes No

E. Add Calculated Fields? Yes No (Complete Section 3)

F. Add Bookmarks? Yes No (Complete Section 4)

G. Add e-mail Control? Yes No Email Address: _____

Section 2: Hardcopy submission- Copies received by fax or mail

A. Scan document into a PDF? Yes No

B. Make document searchable PDF? Yes No

C. Add Form Fields? Yes No

D. Make Form Savable in Reader 7 or Reader 8? Yes No

E. Add Calculated Fields? Yes No (Complete Section 3)

F. Add Bookmarks? Yes No (Complete Section 4)

G. Add e-mail Control? Yes No Email Address: _____

Section 3: Calculated Fields Detail- Please list the fields that you would like to have a calculate function.
Example: Field 3a through 3e on page should total in field 3f.

Section 4: Bookmarks- Please provide a description of bookmarks required.