

Chapter 3

Forms & Information





Adair

CONFIRMATIONS

CONFIRMATION FORMS

The confirmation Form is actually the beginning of the process not the end, and is probably the **single most important document** used at Original Works. **A Confirmation Form that is inaccurate or incomplete can:**

- **Cause a program to be run incorrectly**
- **Cause a program to be delayed entirely**

If information is missing, we will send it back to you for completion or clarification; this is time consuming for you, your school and for the person entering the form in the system. Your cooperation is greatly appreciated; we are all working toward the same end - a successful program with on-time delivery for your schools!

SOME EXTRA NOTES TO START WITH!

Phone Number

When entering a phone number anywhere on the confirmation form **always** include the area code. Many cities, and even some schools, have multiple area codes.

FAX Number

The school fax number is necessary to ensure timely invoicing of a school. **(Absence of this number can cause a delay in payment to OWY and that will cause a delay of your commission payment).**

Coordinator Phone

Please list the **coordinators HOME PHONE NUMBER** in the box for the coordinator information. (If we need to contact a coordinator about a problem with an order, we need her home number). The more phone numbers we have on the form (alternate coordinator) the faster we can resolve any problems, especially if the school is closed for a holiday or the coordinator only picks up her messages from the school once a week.

Code

If a school is a repeat school please list the SCHOOL ACCOUNT CODE for that school on the upper left hand side of the form marked CODE.

Price to Families

When filling in the price to families list, **"Wholesale"** for wholesale cost or **SRP** (Suggested Retail Price) may be placed in the first line in the Price to Families column. For **any kind of custom pricing** (or when including tax, if needed) **list the price on each line.**

Revisions *

Please put an **asterisk next to each revision [on the left of the change or in the columns provided (price,dates,pop)]** on the confirmation form, e.g. each price, date, DFL name and number. This will help identify the revision and we can insure that all changes are entered into our system.

Provide the coordinator with a revised confirmation form.

If the program is an OP, a new DFL will be needed.

The following pages provide a detailed examination of the Confirmation Form and its individual elements. Please review this information carefully.

FIRST PAGE OF CONFIRMATION

CODE - If the school is a repeat, please list. (Once filled in, the code will appear at the bottom of page two).

SEASON - Fa and Sp

Example: Spring 2009 = Sp09 Fall 2009= Fa09

DATE/INITIALS - This is reserved for HQ only.

School Information

- **School Name** - Exact name and spelling, needed for shipping and to appear on DFL (Dear Family Letter). NOTE: When you enter the school name in this space, it will automatically fill-in on page two for you (at the bottom).
- **Street Address** - Exact address for mailing (We cannot deliver to P.O. Box, if you omit 'Rd.' or 'Ave.' UPS will charge extra).
- **City** - Exact name and spelling for shipping.
- **State** - Needed for shipping.
- **Zip** – an incorrect zip code may cause delays.
- **Grade levels** - We use this for demographic information and to send the age appropriate lesson plans.
- **Phone** - School phone number, with area code.
- **Fax** - School fax number with area code. Needed for timely billing.
- **Type of school** – Public, private, preschool, other. Please specify.

Coordinator Home Information

Be sure to use correct spelling for contact information.

- **Home Phone and Cell Phone** - Area code must be included.
- **Street address (City, State, Zip)** – Do not put school address here unless it's a home-based school.
- **E-Mail Address** - Coordinators E-mail address is extremely important. Whenever a package is shipped from OWY to a school, the coordinator will receive an e-mail notification from the UPS computer. (QuantumViewNotify@ups.com).
- **Alter. Coordinator (Phone)** - Additional contact and their phone number.
- **Art Teacher** - Proper spelling please. We may need to contact them.

DFL Name & Phone Number

This is the name & number that will appear on the Dear Family Letter. Be sure you know how they want to be addressed (Ms., Mrs., Mr., first name) and which phone number they want listed!!

BILLING INFORMATION (only if DIFFERENT from school address)

Billing will automatically be addressed to the coordinator at the school address. If there is different information then enter in this section.

Making sure that the billing information is correct will ensure that:

- Billing information is produced correctly & on a timely basis.
- Payments are received and processed faster.
- Commission payments will be produced and mailed out earlier.

Special Instructions and Additional Program Materials

A standard display box includes:

Poster pack (includes posters, art instructions and packing slip)

Coordinator's guide

Art paper

OP schools will also receive pre-stuffed packs which consist of the order form and KTP in a biodegradable bag.

If you want lessons plans, simply put "Lesson Plans" (max 4 plans will be sent).

Please use this area for any additional information we need to know about the program. Any special shipping instructions, additional paper and kit purchases; please note who should be billed for purchased items – rep or school.

Schools will receive a separate invoice for introductory, mini, maxi kits or additional paper. The school may pay this bill along with the product invoice, but they will receive monthly statements for these items until the invoice is paid.

Promo Code

Used for any Test program or Promotional Incentive. Your manager will advise you of the code to use here. If a test product remember to add the product to blank line on the Pricing page w/ the applicable pricing.

EZ Incentive – if qualified

All schools that qualify will receive in their initial materials box:
a return service UPS label
PLUS
a sample (samp) kit of selected products
OR
blank (blnk) labels OR custom (cust) printed labels
(blank and custom receive folders)

The check boxes make it easy to select only ONE option.

How You Found Out About OWY

This information is very valuable in identifying the sources of our leads and assists us in developing programs to improve our lead yields and for you to better understand your territory.

- **Repeat (year)** - If it is a repeat, former year & season it was confirmed.
- **New Repeat** – Check w/ your manager for definition.
- **Referral** - Did you receive this lead from another school or coordinator?
- **Convention/In-Service/Vendor Fair**- Convention name & year?
- **Territory Development** - Was this a cold call from your list or a walk in?
- **HQ Lead/Inquiry**

Date of Revision

If you are sending in a revised confirmation, please indicate with an ***asterisk** and date of the change. Put an ***asterisk** next to each change on the form (dates, prices, coordinator). NOTE: place the asterisk on the left side of the change to ensure it doesn't get cut off due to margin issues when printing. In the schedule, pricing and enrollment areas, there is an actual column provided to place the asterisk.

Confirmation and Rep Information

- **Confirmation Date** - Date the confirmation form was filled out.
- **Sales Rep** - Your Name.
- **Rep Phone & fax** - Your phone number and fax number (if available).
- **Rep E-Mail** - Your email address.
- **Territory Mgr (if applicable)** - Sub-rep. – your territory manager's name goes here and your name would go under Sales Rep.

School Closed Dates

Show all full and half days that the school is closed for program semester. UPS will not deliver to a closed school. *SHOW ½ DAYS AS **CLOSED** AS WE CANNOT GUARANTEE UPS WILL ARRIVE AT THE SCHOOL WITH A DELIVERY BEFORE THEY HAVE CLOSED FOR THE DAY.* No need to put the year. The complete school calendar is helpful for fall schools that send in additional orders after the holidays). List dates in calendar-order.

- **Dates School Closed** – i.e. Spring breaks, holidays breaks, holidays...
- **Last Day** - The last full day students will be in school before the holiday break or summer vacation.
- **Date Classes Resume** - Day school resumes after vacation (i.e. Fall season after holiday break).

Program Information

- **Number of Students Participating** – We need an accurate count. Do not inflate number, this is a critical number used for analysis, forecasting and supplies sent.
- **Families Should Make Checks Payable To** - Families checks must be made payable to school or organization.

How the Funds from the Program will be Used.

If the program is being run as a fundraiser, and the school would like to let the family/parents know how the funds will be used, briefly provide the explanation here. This information will be printed on the Dear Family Letter. The line begins, *“The proceeds from this program will be used for . . .”* (please limit to 30 character spaces).

Schedule Information

Important program dates to include dates program will ship and arrive at both OWY and the school. **(See next few pages for detailed information).**

SECOND PAGE OF CONFIRMATION

Product Pricing Information

- **Product** - List of available products.
- **School Cost** - Wholesale cost of products paid to OWY by school or organization.
- **Suggested Price** -Suggested retail price (**SRP**). School may customize prices for their program by increasing or decreasing this price. If a school is using SRP for all pricing to families, you may write “SRP” in the top line.
- **Price To Families** - List the price the school has decided to charge families. If using Suggested Retail Pricing, put “**SRP**” in the column. If for some reason, the school is using Wholesale Cost, please put “**Wholesale**” in the column. *Be sure price includes tax if it needs to be charged or else it will come out of the schools profit.*

Finance and Tax Information

- **Purchase Orders** - If the school or district requires a Purchase Order (PO) in order to be invoiced, check the box provided and enter the PO number.
- **Currently CA, CO, FL, GA, MD, MI, NC, NJ, NY, SC, TN, TX, UT and VA are taxable states. Please be sure to check appropriate box.** If your territory is in one of these taxable states, speak with your Sales Director regarding the proper tax forms that may be necessary; OWY keeps tax/tax exempt forms that can be electronically forwarded to you. One of the following must be checked:
 - We are TAX EXEMPT and our tax exempt form is attached or will be mailed or faxed. We understand that without a tax exempt form on file that we will be charged sales tax.

- Purchases made by this organization are TAXABLE. We will be charged tax based on the SCHOOL COST of the products.

It is the responsibility of the school or organization to increase the PRICE TO FAMILIES to cover any tax liability.

Coordinator Signature & Date

- **School coordinator should sign, date, and return to Rep as soon as possible**
 - Provide a copy to the Coordinator.
 - Their signature implies they have read the confirmation form and agree with its contents.

Notes:

The only noticeable differences between the SBYB and OP confirmation forms are:

- With OP, there is no preview magnet phase (which includes OWY shipping magnets, school receiving the magnets, and school sending them home). With the OP program, we do not produce a preview magnet; parents order by looking at the original Artwork.
- The **order phase** turnaround time for both OP & SBYB is 12 working/business days however, remember the SBYB program first has an additional magnet phase which has a 10 working/business day turnaround time.
- Tile Wall programs processing time is 22 days from receipt of AW.
- Each season is identified with a code as follows:

Seasons		Code
Fall:	August 1 to January 31	FA
Spring:	February 1 to July 31	SP

***** REQUIRED FIELDS ARE IN RED *****

FALL OP CONFIRMATION



ORIGINAL WORKS

54 Caldwell Rd., Stillwater, NY 12170
 Phone: 800-421-0020 Fax: 518-584-9293
 www.originalworks.com

School Account **CODE** If a 'Repeat' **SEASON** For Office use Date/Initials

SCHOOL INFORMATION				For Office use only c sp D G
Name	No P.O. Box addresses! UPS needs a physical address			
Street				
City	State	Zip Code		
District	County		Phone	
Grade Levels			Fax	
<input type="checkbox"/> Public	<input type="checkbox"/> Pre-K	<input type="checkbox"/> Private	<input type="checkbox"/> Other	Include the area code for every number. (We can not assume a/c because of all the variations w/ cell phones)

COORDINATOR HOME INFORMATION			
Name	Home Phone	Try to list at least one alternative #	
Street	Cell		
City	State	Zip Code	
E-Mail			
Alter. Coord.	Phone	ext	
Art Teacher			
AT E-Mail			
DFL Name	(This is the name & phone # or e-mail printed on customized letter to families)		
Phone &/or e-mail address	Phone	ext	

DFL name PLUS a phone # AND/OR e-mail is required

BILLING INFORMATION (Complete only if DIFFERENT from school address)			
Organization	Bills are sent to the coordinator at the school address and e-mail listed for the coordinator in the above section.		
Billing Contact	If any part is different, then enter separate billing info here.		
Street			
City	State	Zip	
Billing Phone	ext.	Fax	
Billing E-Mail			

SPECIAL INSTRUCTIONS and Additional Program Materials (i.e. lesson plans)	
Extra paper or kit requests w/billing info. Special shipping instructions, etc.	
Promo Code:	Place promo code here if signed on for a promo or test program
{ If applicable, pick one: <input type="checkbox"/> samp or <input checked="" type="checkbox"/> blnk or <input type="checkbox"/> cust }	
This account is a: (check one and identify) <input checked="" type="radio"/> Repeat (year) Fa11 <input type="radio"/> New Repeat <input type="radio"/> Referral from: <input type="radio"/> Convention /In-Service /Vendor Fair: <input type="radio"/> Territory Development: <input type="radio"/> HQ Lead / Inquiry:	

If school qualifies, Check ONLY ONE option:
 samp = sample KIT
 blnk = Blank labels
 cust = Custom printed labels (blnk or cust also receives folder)

(** Asterisk changes made)
 Revision Date If a revision, check the box, give revision date PLUS any changes MUST be asterisked (**).

4/4/13 dates

Confirmation Date	
Sales Rep	Sub-reps - your name goes here
Rep phone &/or fax	
Rep E-Mail	
Territory Mgr (if applicable)	Sub-reps - your Territory Mgr's name goes here

Dates school closed: (complete school year if possible)

List in calendar order. Don't put year: Use consecutive dates separated by a hyphen, example: 10/12, 11/26-29, 3/18-23

Last Day: Fall Season = Last day before holiday break. Spring season = Last day before summer break.

Date Classes Resume: Fall = Resume date after holiday break. Spring = not required

PROGRAM INFORMATION	
Number of students participating:	* 237
Families make checks payable to:	
This information prints on the DFL. (Limit to 30 characters)	

If pop revision, put ** here

If running the program as a fundraiser, you may list how the funds will be used. We will then print this information for you on the customized Dear Family Letter

"The proceeds from this program will be used for. . . ."

The wording for this line on the DFL begins with:
 "The proceeds from this program will be used for. . . ."

(limit of 30 characters)

SCHEDULE INFORMATION	* DATE
OWY sends Program Materials	
School receives Program Materials	
Artwork begins	
Send "Look What's Coming Letter" home	
Send artwork packages with "Dear Family Letter" home	
Deadline for artwork	* Indicate a date revision with your ** in this column
Send orders, artwork & Shipping Form D to OWY	
OWY receives orders / artwork	
OWY sends orders / artwork	
School receives orders / artwork	

Please allow 24-48 hrs from submission date of confirmation to ship program materials date

OP & SBYB school receives orders date is 12 business days from OWY receives artwork date

We recommend using a traceable carrier such as UPS or FedEx for all shipments to Original Works.

▶▶ Please turn over to view pricing information

PRODUCT PRICING INFORMATION

Listed below is our current product line and associated pricing.
The "Price to Families" column will be the pricing on your Dear Family Letter.

(** asterisk changes made)

PRODUCT	Wholesale	Suggested Retail Prices	PRICE TO FAMILIES
Grande Ceramic Mug - 15 oz.	\$ 10.50	\$ 15.75	WHOLESALE
Stainless Steel Water Bottle	\$ 15.00	\$ 22.50	
Coasters (Set of 2)	\$ 8.00	\$ 12.00	
Ceramic Tile / Trivet	\$ 12.25	\$ 18.50	
iPhone 4/4S Cover	\$ 13.00	\$ 19.50	*
Galaxy S3 Phone Cover - New!	\$ 13.00	\$ 19.50	*
iPhone 5 Cover - New!	\$ 13.00	\$ 19.50	
Ceramic Mug - 11 oz.	\$ 9.50	\$ 14.25	
Ceramic Plate - New!	\$ 15.50	\$ 23.25	
Stainless Travel Mug	\$ 14.50	\$ 21.75	
Art Pendant	\$ 8.00	\$ 12.00	
Night Light	\$ 11.50	\$ 17.25	
Decorative Ornament	\$ 10.25	\$ 15.50	
Magnet	\$ 4.00	\$ 6.00	
Key Chains (Set of 2)	\$ 6.00	\$ 9.00	
Notecards (Set of 8)	\$ 8.50	\$ 12.75	
Matted Print	\$ 6.25	\$ 9.50	
Pocket Pads (Set of 2)	\$ 3.50	\$ 5.25	
Sketchbook	\$ 8.50	\$ 12.75	
Journal	\$ 8.50	\$ 12.75	
Pot Holders (Set of 2)	\$ 10.75	\$ 16.00	
Computer Mouse Pad	\$ 8.50	\$ 12.75	
Quilt Block	\$ 3.50	\$ 5.25	
Pillowcase	\$ 9.50	\$ 14.25	
Bamboo Tote Bag	\$ 11.00	\$ 16.50	
Garden/Decorative Flag	\$ 8.25	\$ 12.50	
T-shirt (Adult / Youth)	\$ 11.25	\$ 16.75	
T-shirt (Adult) XXL	\$ 15.25	\$ 22.75	
Office Package	\$ 24.00	\$ 36.00	
Writers & Artists Package	\$ 21.25	\$ 32.00	
Notecard Bonus Set (Set of 24)	\$ 19.50	\$ 29.25	
Magnet Package - New!	\$ 10.75	\$ 16.00	
Ceramic Plate	\$ 2.50	\$ 5.00	\$ 12.00

Price revision & date
4/4/2013
Check the above box and date. Asterisk your revised pricing in this column

You may use either "SRP" or "Wholesale" in the first box IF the prices to families apply to ALL products.

If using any custom prices than your MUST write in ALL pricing.

This "pricing to families" prints on the DFL.

Add any test or additional products here w/ the appropriate pricing

* Wholesale prices may be subject to change without notice

FINANCE and TAX INFORMATION

Yes. Our school or school district requires we issue a **Purchase Order** to Original Works in order to be invoiced. The Purchase Order Number is _____

If your school is located in **CA, CO, FL, GA, MD, MI, NC, NJ, NY, SC, TN, TX, UT or VA**, please review the following and check the appropriate box.

- We are **TAX EXEMPT** and our tax exempt form is attached or will be mailed. We understand that without a tax exempt form on file that we will be charged sales tax
- Purchases made by this organization are **TAXABLE**. We will be charged tax based on the SCHOOL COST.

If school is in a taxable state listed, one or the other must be checked.

PLEASE CONSULT YOUR BUSINESS OFFICE FOR YOUR SALES TAX STATUS AND SCHOOL DISTRICT. It is the responsibility of the school or organization to increase the Prices to Families to cover any tax.

If applicable, be sure school decides how tax will be paid. i.e. Increase retail cost or school understands it will come out of their profit. Tax is charged on the wholesale school cost.

** IMPORTANT PROGRAM INFORMATION **

Shipping is provided on all orders shipped to the school, whose combined wholesale value is \$300.00 or more. For combined wholesale orders of less than \$300.00, a \$25.00 shipping fee will apply and pre-payment of the order is required. The school is responsible for shipping and handling on all artwork/orders sent to Original Works for processing. Wholesale product prices are subject to change without notice.

Please advise your Sales Representative immediately if you need to change your scheduled dates or pricing information. If orders arrive AFTER your scheduled date, order processing will be delayed until the next processing slot becomes available. This could result in orders not being shipped from Original Works until after the holidays. During the Fall season Late Artwork Orders (Form C Orders) will not be processed until after the holidays.

Coordinator: Sign, date & return to your representative (keep a copy for your records)

Signature: _____ **Date:** _____
SCHOOL NAME 0 _____ **School Code** _____

This info will automatically print from page 1

Items in RED denote a required field

FALL 2013 SBYB CONFIRMATION



ORIGINAL WORKS

54 Caldwell Rd., Stillwater, NY 12170
 Phone: 800-421-0020 Fax: 518-584-9293

www.originalworks.com

School Account CODE if a "repeat" SEASON **FALL 13** For Office use Date/Initials

SCHOOL INFORMATION For Office use only C

Name

Street

City State Zip Code

District County

Grade Levels Phone Fax

Public Pre-K Private Other

Include the area code for every number. (We can not assume a/c because of all the

COORDINATOR HOME INFORMATION

Name Home Phone cell

Street City State Zip Code

E-Mail

Alter. Coord. Phone ext

Art Teacher

AT E-Mail

DFL Name &/or Phone e-mail Phone ext

(This is the name & phone # printed on customized letter to families)

BILLING INFORMATION *(Complete only if DIFFERENT from school address)*

Organization

Billing Contact

Street

City State Zip

Billing Phone ext. Fax

Billing E-Mail

SPECIAL INSTRUCTIONS and Additional Program Materials (i.e. lesson plans)

Extra paper or kit requests w/billing info. Special shipping instructions, etc.
 -Lesson Plans are 4 max per school
 -Sample kit purchase, indicate whether to bill school or rep
 -Initial paper supply is provided, **Additional paper** may be purchase, indicate whether to bill school or rep. \$8.25/250sheets

Promo Code: Place promo code here if school signed on for a promo program

(If applicable, pick one: samp or blk or cust)

This account is a: (check one and identify)

Repeat (year)

New Repeat

Referral from:

Convention /In-Service /Vendor Fair:

Territory Development:

HQ Lead / Inquiry:

If school qualifies,
 Check **ONLY ONE** option:
 samp = sample KIT
 blk = Blank labels
 cust = Custom printed labels
 (blk or cust also receives folder)

(** Asterisk changes made)

Revision Date If a revision, check the box, give revision date

Confirmation Date

Sales Rep Sub-reps - your name goes here

Rep phone &/or fax

Rep E-Mail

Territory Mgr (if applicable) Sub-reps - your Territory Mgr's name goes here

Dates school closed: *(complete school year if possible)*

List in calendar order. Don't put year: Use consecutive dates separated by a hyphen; example: 10/12, 11/26-29, 3/18-23

Last Day of Semester: Fall Season = Last day before holiday break.
Spring season = Last day before summer break.

Date Classes Resume: Fall = Resume date after holiday break. Spring= not required

PROGRAM INFORMATION

Number of students participating: NOTE: Program min of 50

Families make checks payable to:

This information prints on the DFL. (Limit to 30 characters)
 This will be the school or program. Not Original Works

If running the program as a fundraiser, you may list how the funds will be used. We will then print this information for you on the customized Dear Family Letter

"The proceeds from this program will be used for. . ."

The wording for this line on the DFL begins with:
"The proceeds from this program will be used for. . ."

SCHEDULE INFORMATION	DATE
OWY sends Program Materials	Please allow 24-48 hrs from submission date of confirmation to ship program materials date
School receives Program Materials	
Artwork begins	
Send "Look What's Coming Letter" home	
Send artwork & Shipping Form A to OWY	
OWY receive Indicate a date revision with your ** in this column → *	
OWY sends magnets / artwork	
School receives magnets / artwork	
Deadline for Family orders	
Send orders, ARTWORK & Shipping Form B to OWY	
OWY receives orders / ARTWORK	OP & SBYB school receives orders date is 12 business days from OWY
OWY sends orders / artwork	
School receives orders / artwork	

If the school is unable to complete the program and submit orders, the school will be responsible for paying 100% of the wholesale value of the SBYB Magnets produced.

▶▶ Please turn over to view pricing information

We recommend using a traceable carrier such as UPS or FedEx.

PRODUCT PRICING INFORMATION

Listed below is our current product line and associated pricing.
The "Price to Families" column will be the pricing on your Dear Family Letter.

(** asterisk changes made)

PRODUCT	Wholesale	Suggested Retail Prices	PRICE TO FAMILIES
Grande Ceramic Mug - 15 oz.	\$ 10.50	\$ 15.75	
Stainless Steel Water Bottle	\$ 15.00	\$ 22.50	wholesale
Coasters (Set of 2)	\$ 8.00	\$ 12.00	
Ceramic Tile / Trivet	\$ 12.25	\$ 18.50	
iPhone 4/4S Cover	\$ 13.00	\$ 19.50	*
Galaxy S3 Phone Cover - New!	\$ 13.00	\$ 19.50	*
iPhone 5 Cover - New!	\$ 13.00	\$ 19.50	
Ceramic Mug - 11 oz.	\$ 9.50	\$ 14.25	
Ceramic Plate - New!	\$ 15.50	\$ 23.25	
Stainless Travel Mug	\$ 14.50	\$ 21.75	
Art Pendant	\$ 8.00	\$ 12.00	
Night Light	\$ 11.50	\$ 17.25	
Decorative Ornament	\$ 10.25	\$ 15.50	
Magnet	\$ 4.00	\$ 6.00	
Key Chains (Set of 2)	\$ 6.00	\$ 9.00	
Notecards (Set of 8)	\$ 8.50	\$ 12.75	
Matted Print	\$ 6.25	\$ 9.50	
Pocket Pads (Set of 2)	\$ 3.50	\$ 5.25	
Sketchbook	\$ 8.50	\$ 12.75	
Journal	\$ 8.50	\$ 12.75	
Pot Holders (Set of 2)	\$ 10.75	\$ 16.00	
Computer Mouse Pad	\$ 8.50	\$ 12.75	
Quilt Block	\$ 3.50	\$ 5.25	
Pillowcase	\$ 9.50	\$ 14.25	
Bamboo Tote Bag	\$ 11.00	\$ 16.50	
Garden/Decorative Flag	\$ 8.25	\$ 12.50	
T-shirt (Adult / Youth)	\$ 11.25	\$ 16.75	
T-shirt (Adult) XXL	\$ 15.25	\$ 22.75	
Office Package	\$ 24.00	\$ 36.00	
Writers & Artists Package	\$ 21.25	\$ 32.00	
Notecard Bonus Set (Set of 24)	\$ 19.50	\$ 29.25	
Magnet Package - New!	\$ 10.75	\$ 16.00	
Galaxy S4 Phone Cover - New!	\$ 13.00	\$ 19.50	
Ceramic Plate	\$ 2.50	\$ 5.00	\$ 12.00

Price revision & date
4/4/2013

Check the above box and date. Asterisk your revised pricing in this column

You may use either "SRP" or "Wholesale" in the first box IF the prices to families apply to ALL products.

If using any custom prices than your MUST write in ALL pricing.

This "pricing to families" prints on the DFL.

* Wholesale prices may be subject to change without notice

Add any test or additional products here w/ the appropriate pricing

FINANCE and TAX INFORMATION

Yes. Our school or school district requires we issue a **Purchase Order** to Original Works in order to be invoiced. The Purchase Order Number is _____

If your school is located in **CA, CO, FL, GA, MD, MI, NC, NJ, NY, SC, TN, TX, UT or VA**, please review the following and check the appropriate box.

- We are **TAX EXEMPT** and our tax exempt form is attached or will be mailed. We understand that without a tax exempt form or file that we will be charged sales tax.
- Purchases made by this organization are **TAXABLE**. We will be charged tax based on the SCHOOL COST.

If applicable, be sure school decides how tax will be paid. i.e. Increase retail cost or school understands it will come out of their profit. Tax is charged on the wholesale school cost.

If school is in a taxable state listed, one or the other must be checked.

PLEASE CONSULT YOUR BUSINESS OFFICE FOR YOUR SALES TAX STATUS AND SCHOOL DISTRICT. It is the responsibility of the school or organization to increase the Prices to Families to cover any

** IMPORTANT PROGRAM INFORMATION **

Shipping is provided on all orders shipped to the school, whose combined wholesale value is \$300.00 or more. For combined wholesale orders of less than \$300.00, a \$25.00 shipping fee will apply and pre-payment of the order is required. The school is responsible for shipping and handling on all artwork/orders sent to Original Works for processing. Wholesale product prices are subject to change without notice.

Please advise your Sales Representative immediately if you need to change your scheduled dates or pricing information. If orders arrive AFTER your scheduled date, order processing will be delayed until the next processing slot becomes available. This could result in orders not being shipped from Original Works until after the holidays. During the Fall season Late Artwork Orders (Form C Orders) will not be processed until after the holidays.

Coordinator: Sign, date & return to your representative (keep a copy for your records)

Signature: _____ **Date** _____
SCHOOL NAME _____ **School Code** _____

This info will automatically print from page 1

GALLERY CONFIRMATION



ORIGINAL WORKS

54 Caldwell Rd., Stillwater, NY 12170
 Phone: 800-421-0020 Fax: 518-584-9293
 www.originalworks.com

School Account **CODE** If a 'Repeat' SEASON **FALL 13** For Office use Date/Initials c sp D

SCHOOL INFORMATION	
Name	No P.O. Box addresses! UPS needs a physical address
Street	
City	State Zip Code
District	County
Grade Levels	Phone
<input type="checkbox"/> Public <input type="checkbox"/> Pre-K <input type="checkbox"/> Private <input type="checkbox"/> Other	Fax Include the area code for every number. (We can not assume a/c because of all the

(** Asterisk changes made) If a revision, check the box, give revision date PLUS any

Revision Date

Confirmation Date
Sales Rep Sub-reps - your name goes here
Rep phone &/or fax
Rep E-Mail
Territory Mgr (if applicable) Sub-reps - your Territory Mgr's name goes here

COORDINATOR HOME INFORMATION	
Name	Home address only. If a home-based school then list the address here AND as the school address.
Street	
City	State Zip Code
E-Mail	Home Phone Try to list at least one alternative # cell
Alter. Coord.	Phone ext
Art Teacher	
AT E-Mail	
DFL Name &/or Phone e-mail	(This is the name & phone # printed on customized letter to families) Phone ext
DFL name PLUS a phone # AND/OR e-mail is required	

Dates school closed: *(complete school year if possible)*

List in calendar order. Don't put year: Use consecutive dates separated by a hyphen; example: 10/12, 11/26-29, 3/18-23

Last Day of Semester: Fall Season = Last day before holiday break. Spring season = Last day before summer break.

Date Classes Resume: Fall = Resume date after holiday break. Spring = not required

PROGRAM INFORMATION	If pop revision, put ** here
Number of students participating:	[]

PROGRAM PROFIT INFORMATION	
Profit check will be made payable to the school unless information is completed below	
Make program profit check payable to:	
Contact	Checks will be sent to the coordinator at the school address listed for the coordinator in the above section. If any part os different, then enter seperate billing info here.
Mailing address	
City	State Zip
Phone	ext.
E-Mail	

If running the program as a fundraiser, you may list how the funds will be used. We will include this information in your Gallery Introduction and print it on your customized Dear Family Letter.

"The proceeds from this program will be used for. . ."

The wording for this line on the DFL begins with: **"The proceeds from this program will be used for. . ."**

(limit of 30 characters)

SPECIAL INSTRUCTIONS and Additional Program Materials
Extra paper or kit requests w/billing info. Special shipping instructions, etc.
Promo Code: Place promo code here if signed on for a promo or test program

This account is a: (check one and identify)

Repeat (year)

New Repeat

Referral from:

Convention /In-Service /Vendor Fair:

Territory Development:

HQ Lead / Inquiry:

***If submitting Manual Orders, they must be sent to arrive by the deadline date for Online Orders. These orders must be paid with a credit card. No checks.**

We recommend using a traceable carrier such as UPS or FedEx when submitting manual orders.

SCHEDULE INFORMATION	DATE
Preparation Phase:	
School e-mails class list for custom artwork labels	
OWY sends Program Materials & Cus	This date should be no less than 1 week prior to OWY sends Program Materials
School receives Program Materials	
Artwork begins	
Send "Look What's Coming Letter" home	
Scan Phase:	
Send artwork w/ student label & Shipping Form E to OWY	
OWY receives artwork w/ student label	
OWY sends artwork & parent package	
School receives artwork & parent package	
Online Order Phase:	
Deadline for Online Orders	date that we close the on-line orders
OWY sends completed ord	sames as OP school receives orders date is 12 business days from OWY
School Receives completed	
*Manual Orders: (Use <i>only when necessary</i>)	
School sends Manual Orders/Artwork	
OWY Receives Manual Orders (Same as online order deadline)	
OWY sends completed orders (Same as online order date)	
Late orders due	

PRODUCT PRICING INFORMATION

Listed below is our current product line and associated pricing.
The "Price to Families" column will be the pricing on your Dear Family Letter
and may be subject to sales tax if applicable.

(** asterisk changes made)

Price revision &

PRODUCT	Wholesale	Suggested Retail Prices	PRICE TO FAMILIES
Grande Ceramic Mug - 15 oz.	\$ 10.50	\$ 15.75	
Stainless Steel Water Bottle	\$ 15.00	\$ 22.50	
Coasters (Set of 2)	\$ 8.00	\$ 12.00	
Ceramic Tile / Trivet	\$ 12.25	\$ 18.50	
iPhone 4/4S Cover	\$ 13.00	\$ 19.50	*
Galaxy S3 Phone Cover - New!	\$ 13.00	\$ 19.50	
iPhone 5 Cover - New!	\$ 13.00	\$ 19.50	
Ceramic Mug - 11 oz.	\$ 9.50	\$ 14.25	
Ceramic Plate - New!	\$ 15.50	\$ 23.25	
Stainless Travel Mug	\$ 14.50	\$ 21.75	
Art Pendant	\$ 8.00	\$ 12.00	
Night Light	\$ 11.50	\$ 17.25	
Decorative Ornament	\$ 10.25	\$ 15.50	
Magnet	\$ 4.00	\$ 6.00	
Key Chains (Set of 2)	\$ 6.00	\$ 9.00	
Notecards (Set of 8)	\$ 8.50	\$ 12.75	
Matted Print	\$ 6.25	\$ 9.50	
Pocket Pads (Set of 2)	\$ 3.50	\$ 5.25	
Sketchbook	\$ 8.50	\$ 12.75	
Journal	\$ 8.50	\$ 12.75	
Pot Holders (Set of 2)	\$ 10.75	\$ 16.00	
Computer Mouse Pad	\$ 8.50	\$ 12.75	
Quilt Block	\$ 3.50	\$ 5.25	
Pillowcase	\$ 9.50	\$ 14.25	
Bamboo Tote Bag	\$ 11.00	\$ 16.50	
Garden/Decorative Flag	\$ 8.25	\$ 12.50	
T-shirt (Adult / Youth)	\$ 11.25	\$ 16.75	
T-shirt (Adult) XXL	\$ 15.25	\$ 22.75	
Office Package	\$ 24.00	\$ 36.00	
Writers & Artists Package	\$ 21.25	\$ 32.00	
Notecard Bonus Set (Set of 24)	\$ 19.50	\$ 29.25	
Magnet Package - New!	\$ 10.75	\$ 16.00	
Galaxy S4 Phone Cover - New!	\$ 13.00	\$ 19.50	

Check the above box and date.
Asterisk your revised pricing
in this column

You may use either "SRP" or "Wholesale" in the first box
IF the prices to families apply to ALL products.

If using any custom prices than your MUST write in ALL pricing.

This "pricing to families" prints on the DFL.

* Wholesale prices may be subject to change without notice

** Each order will be assessed a nominal \$1.50 processing & handling fee

FINANCE and TAX INFORMATION

If your school is located in **CA, CO, FL, GA, MD, MI, NC, NJ, NY, SC, TN, TX, UT or VA**
sales tax will be charged based on the retail value of all purchases.

** IMPORTANT PROGRAM INFORMATION **

Please advise your Sales Representative immediately if you need to change scheduled dates or pricing information. If orders arrive after your scheduled date, order processing will be delayed until the next processing slot is available. This could result in orders not being shipped until after the holidays. During the Fall season Late Artwork Orders will not be processed until after the holidays.

Coordinator: Sign, date & return to your representative (keep a copy for your records)

Signature: _____ **Date** _____
SCHOOL NAME _____ **School Code** _____



TEMPLATES

4 CONTACTS FOR SBYB PROGRAM

FIRST CONTACT - SBYB

Dear _____

Thank you for choosing Original Works! Your confirmation has been processed and your program supply box will be shipped according to your schedule. Please take a moment to review the following:

- Attached is a copy of your confirmation form. Please review, type your name and the date on the second page in the space provided and return to me. If you prefer, you may fax or mail a hard copy within 7 days to **Fax #:** _____ or **Mail:** _____.

Our Customer Care Center is a great resource. You will be able to access downloadable forms, program documents, lesson plans and frequently asked questions. Simply go to www.originalworks.com and click on '**Customer Care Center**' under the easel picture. Enter password **CCC1314** and it's all there for you!

For questions regarding your program, please refer to your Electronic Coordinator's Guide (ECG) and the Customer Care Center on our website. You can also contact me at _____*Phone*_____ or _____*email*_____. We look forward to creating a wonderful experience for you and the families at ______. Have a great day!

SECOND CONTACT – SBYB

When the box of supplies is received by the school.

Dear _____:

Thank you again for choosing Original Works!

At the time you confirmed your program you were sent an email containing your **Confirmation**, which includes your **schedule** and a copy of your “**Dear Family**” letter (for Original Program only). Now is a great time to review the contents of that email. **We recommend you keep this email for reference.**

Your supply package from Original Works has been shipped according to your schedule. If you have not received the package by your scheduled ‘receives program materials’ date please contact me. Once the package arrives please open it and inventory its contents. There is a hardcopy of your **Coordinator’s Guide** included. Please keep this on hand for reference.

Please click [here](#) to review the newly updated “**Art Instructions**”. They are also included in your Coordinator’s Guide. The instructions have been updated with more detail to assist you in making sure your school’s artwork meets our requirements. Please forward a copy to the art instructor so that he or she may review them.

Click [here](#) to see our **e-Marketing Kit Guide** to begin promoting your program.

Please make copies and distribute the “**Look What’s Coming**” letter early in your program. For **See Before You Buy Program** click [here](#).

To further promote the program, remember to:

- Display the poster(s) we’ve provided you.
- Utilize the morning announcements and the school newsletter.
- Post information on your school’s website and/or social media platforms.
- Create your own promotional reminder to send home to the parents.

Should you have any questions please call me. Your password to enter [Customer Care Site](#) for **Forms & Lesson Plans** is **CCC1314**. We are excited to work with you!

THIRD CONTACT - SBYB

The Third contact should be made about **a week before** the coordinator is **to send the artwork** for the preview magnets (organized by class) to Original Works.

Dear _____

- Your deadline to send your artwork to Original Works for the magnet phase is quickly approaching! **If you are behind schedule, contact your Sales Representative immediately.**
- **Make sure all artwork has student's name, grade, and teacher on the back** of the artwork using labels or written in pencil. Place a "T" on **back** of artwork along the top edge to indicate the top.
- **Please organize artwork by teacher/class and then grade.** Please use folders to keep the orders/artwork separated by class/grade; then write the teacher's name, grade and number of artworks submitted on the outside of the folder.
- **We recommend placing all folders in one large plastic bag.** Large Zip lock bags work great! This helps to keep your artwork dry and protected from water damage while in transit.
- **Include Shipping Form A (attached).** This can also be found in your Coordinator's Guide, as well as our Customer Care Site: <http://www.originalworks.com/customer-care/>. **Your password is CCC1314.**
- **Send artwork package on the scheduled ship** date using a traceable carrier, such as UPS or FedEx.

Student(s) Missing Preview Magnet Shipment:

Please hold on to any additional artwork received AFTER you have shipped artwork for the magnet phase. We **cannot** accept any late artwork for the magnet phase of the program. If a student missed the magnet phase of the program, they are still eligible to submit an order for any product(s), including a magnet, during the order phase of the program. Simply send home the child's artwork along with a brochure and order form. We will send extra packets with the preview magnets.

This is not a preview magnet, but a purchased magnet. **Disregard the top box referring to the YES/NO question about the preview magnet. Order the magnet on line 9 of the order form.**

NOTE: If you need more than 10 EXTRA brochures and order forms, please contact your Sales Representative right away.

If you have any questions, refer to your Coordinator's Guide, our website, or contact me directly.

FOURTH CONTACT - SBYB

The Seventh contact is made to ensure any problems (if there were any) have been taken care of and to say thank you for coordinating the program. This contact is best made by phone. This is also the time to sign the school on for another season, ask for referrals and testimonials.



Staying in touch makes everyone feel confident and happy and keeps your program on schedule.

4 CONTACTS FOR OP PROGRAM

FIRST CONTACT - OP

Should include your contact information and be sent within a week of the confirmation.

Dear _____

Thank you for choosing Original Works! Your confirmation has been processed and your program supply box will be shipped according to your schedule. Please take a moment to review the following:

- Attached is a copy of your confirmation form. Please review, type your name and the date on the second page in the space provided and return to me. If you prefer, you may fax or mail a hard copy within 7 days to **Fax #:** _____ or **Mail:** _____.

Our Customer Care Center is a great resource. You will be able to access downloadable forms, program documents, lesson plans and frequently asked questions. Simply go to www.originalworks.com and click on '**Customer Care Center**' under the easel picture. Enter password **CCC1314** and it's all there for you!

For questions regarding your program, please refer to your Electronic Coordinator's Guide (ECG) and the Customer Care Center on our website. You can also contact me at _____*Phone*_____ or _____*email*_____. We look forward to creating a wonderful experience for you and the families at ______. Have a great day!

SECOND CONTACT - OP

The second contact should be made when the box of supplies is received by the school. With the OP program please advise the coordinator to start making up her parent packets while the artwork is being done. This is also a great time to ask for referrals.

Dear _____:

Thank you again for choosing Original Works!

At the time you confirmed your program you were sent an email containing your **Confirmation**, which includes your **schedule** and a copy of your "**Dear Family**" letter (for Original Program only). Now is a great time to review the contents of that email. **We recommend you keep this email for reference.**

Your supply package from Original Works has been shipped according to your schedule. If you have not received the package by your scheduled 'receives program materials' date please contact me. Once the package arrives please open it and inventory its contents. There is a hardcopy of your **Coordinator's Guide** included. Please keep this on hand for reference.

Please click [here](#) to review the newly updated "**Art Instructions**". They are also included in your Coordinator's Guide. The instructions have been updated with more detail to assist you in making sure your school's artwork meets our requirements. Please forward a copy to the art instructor so that he or she may review them.

Click [here](#) to see our **e-Marketing Kit Guide** to begin promoting your program.

Please make copies and distribute the "**Look What's Coming**" letter early in your program. For **Original Program** click [here](#).

To further promote the program, remember to:

- Display the poster(s) we've provided you.
- Utilize the morning announcements and the school newsletter.
- Post information on your school's website and/or social media platforms.
- Create your own promotional reminder to send home to the parents.

Should you have any questions please call me. Your password to enter [Customer Care Site](#) for **Forms & Lesson Plans** is **CCC1314**. We are excited to work with you!

THIRD CONTACT - OP

The third contact should be made about two weeks before the coordinator is to send the artwork and orders to Original Works.

Dear _____

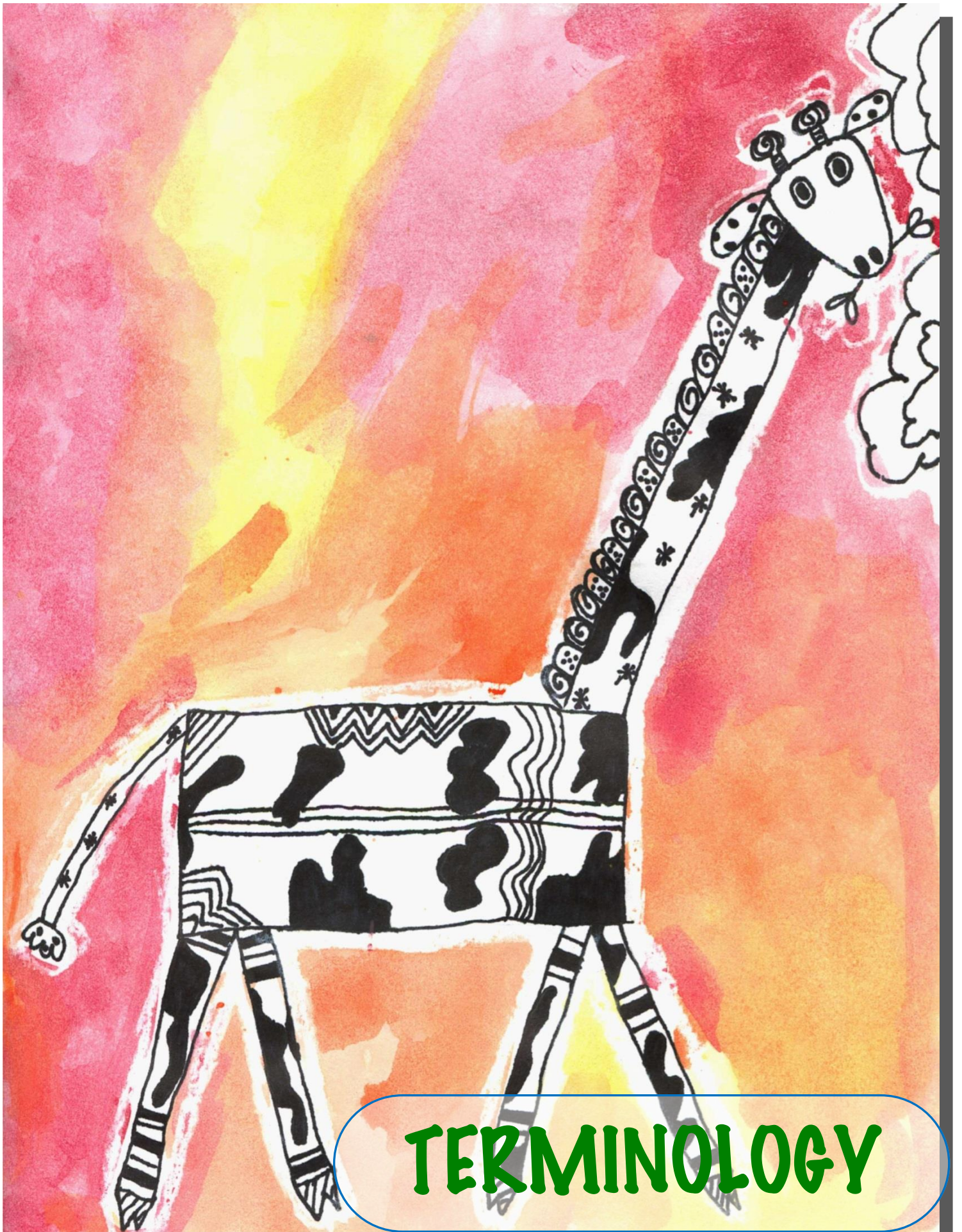
Your deadline to send your artwork and orders to Original Works is quickly approaching! **If you are behind schedule contact your sales representative immediately.**

- Double check and make sure all artwork is on the same size paper.
- Check that no abrasive (sand or salt), no fluorescent or neon colors, no metallic materials (glitter, glitter paint, glitter glue, or foils, etc.) are used. The artwork should have the child's name, teacher and grade **on the back** using labels or written in pencil. Also, please place a "T" on the back of the artwork along the top edge to indicate top.
- When organizing the artwork, please organize by teacher/class and then grade.
- Check each order form for accuracy. Order forms should be taped to the back of the artwork (only 1 artwork per order form please). *Please, attach the white copy and retain the yellow copy for school records.* **Customer service requires order number for reference.**
- Please use folders to keep the orders/artwork separated by class/grade; then write the teacher name, grade and number of artworks submitted on the outside of the folder. (Refer to your Coordinator's Guide: page 6 for OP and page 8 for SBYB)
- We strongly recommend placing all folders TOGETHER in one large plastic bag (gallon size zip lock bags work great); this helps keep your artwork/orders dry and protected while in transit.
- Shipping Form D (**Original Program**), **attached**, must accompany your artwork shipment. These forms can also be found on our **Customer Care Site** on our website (<http://www.originalworks.com/customer-care/>) (Password: **CCC1314**), and in your Coordinator's Guide.
- Send your artwork/order package on the scheduled ship date using a traceable carrier, such as UPS or FedEx. Please realize artwork arriving after the scheduled date may take longer to process and deliver.

If you have any questions, feel free to refer to your Coordinator's Guide, our website, or contact me directly.

FORTH CONTACT - OP

This contact is made to ensure all the problems (if there were any) have been taken care of and to say thank you for coordinating the program. This contact is best made by phone. This is also the time to sign the school on for another season, ask for referrals and testimonials.



TERMINOLOGY

OWY TERMS

Like many other companies, we have developed several of our own terms and/or acronyms that we use in conversation and in this sales material. Below are some more commonly used terms:

OWY

Original Works Yours (although we go by the name Original Works, this is actually our legal corporate name)

S&M

Sales & Marketing

SBYB

See Before You Buy Program

OP

Original Program

DFL

Dear Family Letter. This is the letter that goes home to the families participating in the SBYB or OP Program. The letter describes the program and includes product information and pricing.

KTP

Kitchen Table Piece. This is the full color product brochure folder. This KTP is used to create the parent package, which is sent home to all participants in the SBYB and OP Programs.

FIX-IT

Refers to a Fix-It - An order that is not fulfilled correctly. Because our products are custom made for each and every student the problem must be a defect in workmanship: For example, if a parent decided they wanted a sweatshirt instead of a t-shirt this is not a fix-it. The problem must be a material defect, production of the wrong product, printing upside down and/or missing order that the organization has been charged for. We would like the opportunity to remake the problem product, the artwork with the original order form must be returned to Original Works with a form F.

SRP

Suggested Retail Price; may be used as an abbreviation on the confirmation form for the retail price to families.

WHOLESALE OR COST

The wholesale cost of the products charged to the schools for the products the families purchase from OWY. "Wholesale" or "W" may be used on confirmations to indicate if school is choosing to use wholesale cost as price to families.



WHO'S WHO

WHO'S WHO AT ORIGINAL WORKS

Ted Newlin, Chairman & CEO	newlint@originalworks.com
Carol Newlin, President & Founder	newlinc@originalworks.com
Lisa Hall, VP of Finance	hallll@originalworks.com
Sharon Squiers, VP of Sales	sharons@originalworks.com
Dave Morrissey, VP of Marketing	dmorrissey@originalworks.com
Diane Loviza, VP of Production	DLoviza@originalworks.com
Chris Witcher, In-house Sales Manager	witcherc@originalworks.com
Brian McQuade, Finance	mcquadeB@originalworks.com
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Kim Travis, Sales Support	Travis@originalworks.com
Joan Toyama, Sales Support	toyamaj@originalworks.com

COMMONLY USED EXTENSIONS

Dave Morrissey	317
Sharon Squiers	302
Lisa Hall	306
Chris Witcher	319
Shari Perkins	332

HQ Phone: 800-421-0020

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Diane Loviza 309

Brian McQuade 305

Leah Groff 313

Peggy Sheehan 312

