

INTERNAL USE ONLY:
 CODE: _____
 RECV'D BY: _____
 DATE: _____



**Original
Works**

Shipping Form F

Fix-It Form

Organization Information: Please complete all information

Organization:	School Account Code:	
Address:		
City:	State:	Zip:
Contact:	Phone:	
Please note any weekdays you will be closed:		

Fix-It: All information is required, including description of art, in order to process

Order Form #:	Is artwork (choose one) <input type="checkbox"/> Vertical (portrait) or <input type="checkbox"/> Horizontal (landscape)	
Description of art:		
Product:	Problem:	

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Send to: ORIGINAL WORKS • cs@originalworks.com • fax: 518-580-0639
 FI-Building 1 • 54 Caldwell Road • Stillwater, NY 12170 • 800-421-0020