

Firm Name:	E-mail address:
Order By:	Phone:
Direct:	Fax:
Address:	Today's Date/Time:
	Due Date/time:
	Time of Pick-Up:
	# of Boxes:
	# of Original:
Client Matter#	Job Description:
Case Name:	Grade/rate

SCANNING INSTRUCTIONS					
SCANNING	<input checked="" type="checkbox"/> Scan all	<input checked="" type="checkbox"/> Scan select	<input checked="" type="checkbox"/> Scan only documents with:		
FILE FORMAT	<input checked="" type="checkbox"/> TIFF	<input checked="" type="checkbox"/> PDF	<input checked="" type="checkbox"/> JPG	Other:	
TIFF DPI	<input checked="" type="checkbox"/> 200	<input checked="" type="checkbox"/> 300	<input checked="" type="checkbox"/> 400	<input checked="" type="checkbox"/> Other	
SINGLE OR MULTI-PAGE	<input checked="" type="checkbox"/> Single	<input checked="" type="checkbox"/> Multi-page			
POST-ITS	<input checked="" type="checkbox"/> Scan pages as is	<input checked="" type="checkbox"/> Remove & Replace (no scan)	<input checked="" type="checkbox"/> Remove, place on separate page scanner	<input checked="" type="checkbox"/> Remove, place on separate page scanner	
COLOR	<input checked="" type="checkbox"/> Black & White	<input checked="" type="checkbox"/> Color for color Photographs ,Chart ,Map	<input checked="" type="checkbox"/> Capture Highlight	<input checked="" type="checkbox"/> Capture Pen Color	
OVERSIZE	<input checked="" type="checkbox"/> Scan size for size	<input checked="" type="checkbox"/> Scan legend only	<input checked="" type="checkbox"/> Reduce to 11X17		

PHYSICAL UNITIZATION/DOC BREAKS
<input checked="" type="checkbox"/> Smallest Physical
<input checked="" type="checkbox"/> Largest Physical
<input checked="" type="checkbox"/> Slip sheet
<input checked="" type="checkbox"/> Rubber band
<input checked="" type="checkbox"/> Clip
<input checked="" type="checkbox"/> Staple
<input checked="" type="checkbox"/> Binder
<input checked="" type="checkbox"/> Folder
<input checked="" type="checkbox"/> Red weld
<input checked="" type="checkbox"/> Box
<input checked="" type="checkbox"/> Bind <input checked="" type="checkbox"/> Other:
FIELDS TO CAPTURE @ SCAN
<input checked="" type="checkbox"/> Bates Number <input checked="" type="checkbox"/> Tab
<input checked="" type="checkbox"/> Folder
<input checked="" type="checkbox"/> Box Number
<input checked="" type="checkbox"/> Custodian
<input checked="" type="checkbox"/> Source
<input checked="" type="checkbox"/> Attachment
<input checked="" type="checkbox"/> Other:

DO WE SCAN?	
Cover	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Spines	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
File Tabs	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Red welds	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Dividers Tabs	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Standard Language	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Color/Slip sheets	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Color Sheets w/information	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Envelopes	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Carbonless Paper	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Checks	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Receipts	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Floppies/CDs/DVDs cover	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Colored Flags	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Blank Pages	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No

BATES NUMBERING INSTRUCTIONS	
Bates label scanned document?	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Endorse/brand Bates number each page?	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Should we capture the existing bates?	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are we redacting existing bates number?	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes <input checked="" type="checkbox"/> Manual <input checked="" type="checkbox"/> Electronic	
<input checked="" type="checkbox"/> Standard (Font: Arial Bold, Size: 12pt)	
<input checked="" type="checkbox"/> Other Font: _____ Size: _____	
Sample Bates <div style="border: 1px solid black; height: 100px; width: 100%; margin-top: 10px;"></div>	

EXPORT INSTRUCTIONS					
IMAGE TYPE	LOAD FILE	VIEWER	OCR	CONVERSION	MEDIA
<input checked="" type="checkbox"/> Tiff	<input checked="" type="checkbox"/> Concordance - DAT	<input checked="" type="checkbox"/> Opticon	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	CD/DVD_____
<input checked="" type="checkbox"/> PDF	<input checked="" type="checkbox"/> Concordance - DB	<input checked="" type="checkbox"/> IPRO	<input checked="" type="checkbox"/> Select page or Documents	<input checked="" type="checkbox"/> TIFF	USB_____
<input checked="" type="checkbox"/> Searchable PDF	<input checked="" type="checkbox"/> IPRO. LFP	<input checked="" type="checkbox"/> DocuLex	<input checked="" type="checkbox"/> Include text in Load file	<input checked="" type="checkbox"/> PDF	
<input checked="" type="checkbox"/> JPG	<input checked="" type="checkbox"/> Summation DII	<input checked="" type="checkbox"/> Storm	<input checked="" type="checkbox"/> Single Page Text	<input checked="" type="checkbox"/> Black & White	
<input checked="" type="checkbox"/> Hyperlinks	<input checked="" type="checkbox"/> Ringtail	<input checked="" type="checkbox"/> Storm with text	<input checked="" type="checkbox"/> Multi-Page Text	<input checked="" type="checkbox"/> Color	
<input checked="" type="checkbox"/> Bookmarks	<input checked="" type="checkbox"/> Other: _____				
<input checked="" type="checkbox"/> Other: _____					

SPECIAL INSTRUCTIONS