



<p>Please Tick the appropriate box, sign off and date before returning.</p> <p><input type="checkbox"/> Alterations as marked with new proof required.</p> <p><input type="checkbox"/> Alterations as marked then O.K. to proceed with platemaking.</p> <p><input type="checkbox"/> O.K. to proceed with platemaking.</p> <p>Signed: _____ Date: _____</p>	<p>CRUPPLES CHEW & CRUNCH</p>	<table><tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td>WHITE 1</td><td>CYAN</td><td>MAGENTA</td><td>YELLOW</td><td>P BLACK</td><td>BLACK</td><td>DIELINE</td><td>UNPRINTED FOIL</td></tr></table> <p>nb. This proof is a digital reproduction. Colours on the proof may not match those required for the job. Colour reference should be made to Pantone® matching guide. Whilst every care has been taken in producing this artwork, we accept no responsibility for errors not noted on the proof.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	WHITE 1	CYAN	MAGENTA	YELLOW	P BLACK	BLACK	DIELINE	UNPRINTED FOIL	<p>Sealed Air</p> <p>CRYOVAC®</p> <p>Food Packaging Systems</p>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
WHITE 1	CYAN	MAGENTA	YELLOW	P BLACK	BLACK	DIELINE	UNPRINTED FOIL												