

PLANETPRESS® SUITE



Samples Book

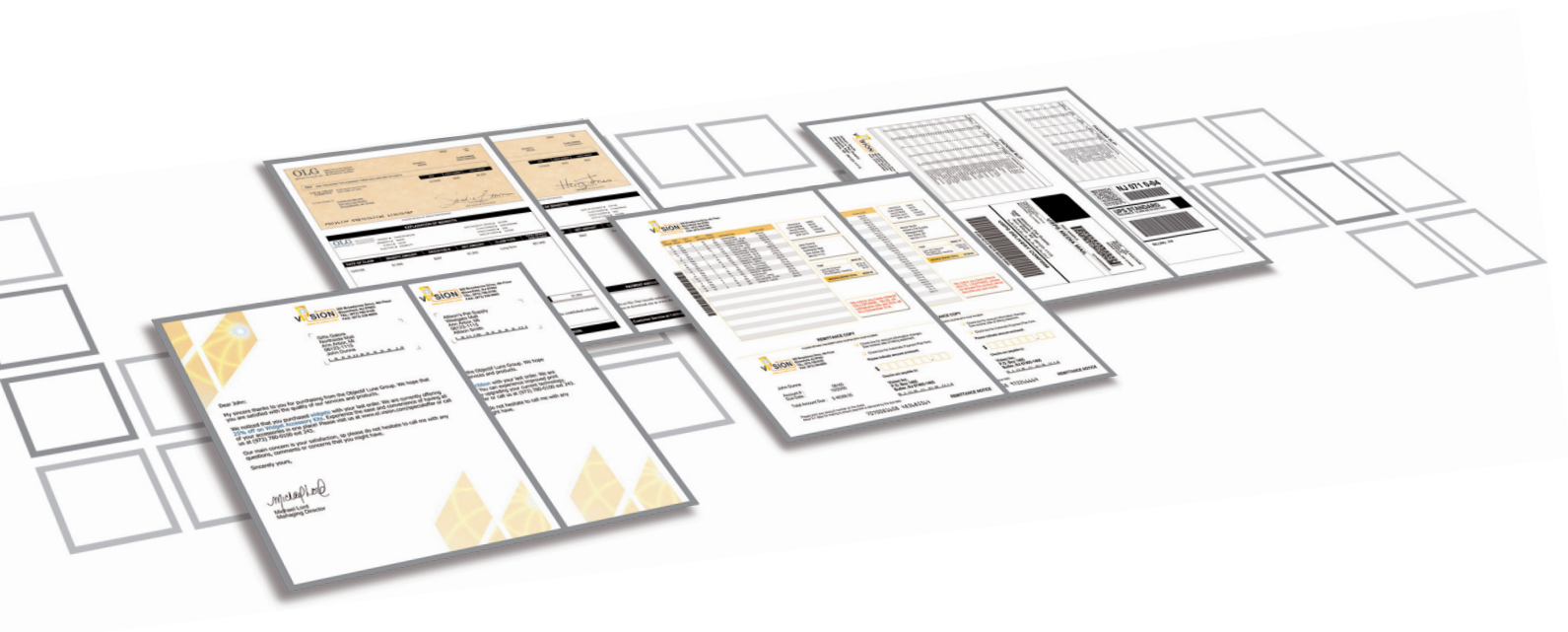




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Invoice



- Automate many of the processes associated with printing statements and invoices, eliminating manual bursting, separating and distributing.
- Cut costs and increase workflow efficiencies.
- Improve corporate image with crisp looking laser printed documents.
- Eliminate the cumbersome process of loading, re-loading and aligning preprinted forms.

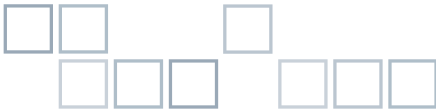
With no change to your host, you can benefit from the powerful features of PlanetPress Suite:

Data can be mapped and reformatted in any number of ways. For example, include a Remittance Coupon on the bottom of an invoice with a data driven barcode, increases workflow efficiency while offering the ability to track payments. Invoices can contain graphics, barcodes, text or pages that are printed automatically depending upon information contained within the data stream.

Source Z-fold pressure seal stock with your logo pre-printed in color. Once printed, the Z-fold stock can be placed in a folder sealer to produce mailing pieces with no envelopes. The Z-fold stock with your logo is 50% the price of the pre-printed form and envelope combined. The bursting and envelope stuffing is eliminated, saving 5 man-days each month.

In addition you can:

- Automatically archive copies as a PDF or TIFF (single or multi-page) image along with an XML index file. Use hot folders to feed into a third party archival system or retrieve using PlanetPress Search.
- Easily integrate with a third party solution to pre-sort and cleanse mailing addresses as well as group multiple invoices to the same customer. This automated process may lead to very large savings on labor and mail costs.
- Use distributed print. For example, continue to print invoices in the data center or route the data to the mailroom on the first floor of the corporate office in another city for printing.
- Implement a solution replacing noisy, dirty line printers using expensive pre-printed forms with PlanetPress Suite and PostScript® printers/MFPs using cut sheet paper.



Raw DATA - Before

OBJECTIF LUNE		10/25/00				
300 BROADACRES DRIVE		04745				
4th Floor		03452				
BLOOMFIELD, NJ 07003		01049				
973-780-0100		ABC				
		USPS				
		10/20/00				
Allison's Pet Supply						
Westgate mall						
Ann Arbor, MI						
12206-0000						
Allison Smith						
smitha@noname.com						
70	64	6	391 CELLOPHANE - PLAID	Pod	81.00	5184.00
83	73	10	613 CELLOPHANE - BLUE	Bag	74.47	5436.31
16	11	5	826 CELLOPHANE - RED	Doz	16.52	181.72
77	68	9	970 CELLOPHANE - BLUE	Ea	95.30	6480.40
97	92	5	635 TOENAIL CLIPPERS	Box	14.46	1330.32
85	76	9	285 HUBCAPS	Pod	20.00	1520.00
77	68	9	511 WIDGETS - SMALL	Bag	80.83	5496.44
98	96	2	746 DOORKNOBS	Doz	60.18	5777.28
78	70	8	836 HUBCAPS	Ea	61.65	4315.50
67	60	7	337 TOENAIL CLIPPERS	Box	80.60	4836.00
85	78	7	822 CELLOPHANE - BLUE	Pod	31.71	2473.38
63	60	3	655 DOORKNOBS	Bag	9.94	596.40
15	10	5	295 BIRDS - BADMINTON	Doz	25.44	254.40
89	88	1	479 DOORKNOBS	Ea	4.06	357.28
84	82	2	57 BALLS - PING-PONG	Box	89.40	7330.80
76	66	10	554 DOORKNOBS	Pod	68.10	4494.60
94	86	8	809 TOENAIL CLIPPERS	Bag	16.81	1445.66
96	93	3	878 CELLOPHANE - RED	Doz	1.17	108.81
54	45	9	628 DOORKNOBS	Ea	0.45	20.25
20	18	2	505 WIDGETS - MEDIUM	Box	58.42	1051.56
93	87	6	456 DOORKNOBS	Pod	96.62	8405.94
93	88	5	608 BALLS - PING-PONG	Bag	36.20	3185.60
13	8	5	516 HOOD ORNAMENTS	Doz	70.67	565.36
37	34	3	838 BOLTS - LIGHTNING	Ea	93.05	3163.70
31	27	4	325 TOENAIL CLIPPERS	Box	50.69	1368.63
52	43	9	644 WIDGETS - SMALL	Pod	7.76	333.68
15	14	1	853 WIDGETS - MEDIUM	Bag	28.46	398.44
82	76	6	279 CELLOPHANE - PLAID	Doz	70.88	5386.88
88	81	7	806 BIRDS - BADMINTON	Ea	44.19	3579.39
62	61	1	173 BALLS - PING-PONG	Box	85.65	5224.65
63	55	8	839 CELLOPHANE - PLAID	Pod	90.63	4984.65
23	19	4	987 HUBCAPS	Bag	69.96	1329.24
42	35	7	615 WIDGETS - MEDIUM	Doz	41.79	1462.65
29	19	10	12 DOORKNOBS	Ea	15.85	301.15
63	54	9	449 HOOD ORNAMENTS	Box	47.05	2540.70



300 Broadacres Drive, 4th Floor
 Bloomfield, NJ 07003
 TEL: (973) 780-0100
 FAX: (973) 338-8885

Data is reformatted to create space
 for additional functions/messaging

Graybars improve readability

QTY ORDER	UNIT EACH	QTY BACK	QTY SHIPPED	PROD CODE	DESCRIPTION	TOTAL COST
70	Pod	6	64	391	CELLOPHANE - PLAID	5184.00
83	Bag	10	73	613	CELLOPHANE - BLUE	5436.31
16	Doz	5	11	826	CELLOPHANE - RED	181.72
77	Ea	9	68	970	CELLOPHANE - BLUE	6480.40
97	Box	5	92	635	TOENAIL CLIPPERS	1330.32
85	Pod	9	76	285	HUBCAPS	1520.00
77	Bag	9	68	511	WIDGETS - SMALL	5496.44
98	Doz	2	96	746	DOORKNOBS	5777.28
78	Ea	8	70	836	HUBCAPS	4315.50
67	Box	7	60	337	TOENAIL CLIPPERS	4836.00
85	Pod	7	78	822	CELLOPHANE - BLUE	2473.38
63	Bag	3	60	655	DOORKNOBS	596.40
15	Doz	5	10	295	BIRDS - BADMINTON	254.40
89	Ea	1	88	479	DOORKNOBS	357.28
84	Box	2	82	57	BALLS - PING-PONG	7330.80
76	Pod	10	66	554	DOORKNOBS	4494.60
94	Bag	8	86	809	TOENAIL CLIPPERS	1445.66
96	Doz	3	93	878	CELLOPHANE - RED	108.81
54	Ea	9	45	628	DOORKNOBS	20.25
20	Box	2	18	505	WIDGETS - MEDIUM	1051.56
93	Pod	6	87	456	DOORKNOBS	8405.94
93	Bag	5	88	608	BALLS - PING-PONG	3185.60
13	Doz	5	8	516	HOOD ORNAMENTS	565.36
37	Ea	3	34	838	BOLTS - LIGHTNING	3163.70
31	Box	4	27	325	TOENAIL CLIPPERS	1368.63
52	Pod	9	43	644	WIDGETS - SMALL	333.68
15	Bag	1	14	853	WIDGETS - MEDIUM	398.44
82	Doz	6	76	279	CELLOPHANE - PLAID	5386.88
88	Ea	7	81	806	BIRDS - BADMINTON	3579.39
62	Box	1	61	173	BALLS - PING-PONG	5224.65
63	Pod	8	55	839	CELLOPHANE - PLAID	4984.65
23	Bag	4	19	987	HUBCAPS	1329.24
42	Doz	7	35	615	WIDGETS - MEDIUM	1462.65
29	Ea	10	19	12	DOORKNOBS	301.15
63	Box	9	54	449	HOOD ORNAMENTS	2540.70



Easily created barcodes contain
 reference info such as invoice
 number and postal zip codes

INVOICE #	03452
CUSTOMER#	04745
SALES REP#	01049
INVOICE DATE	10/20/08
SHIP DATE	10/25/08

Allison Smith
 Allison's Pet Supply
 Westgate mall
 Ann Arbor, MI 06123-1115

Total	100921.77
Less 10% Discount	10092.18
Plus Sales Tax	6358.07
Plus Shipping / Handling	39.00
INVOICE GRAND TOTAL	97226.66

Conditional messaging
 based on inventory level

We notice you have ordered
BOLTS - LIGHTNING, please
 be advised this product will be
 discontinued next month.

Remittance slip allows easier
 matching of payments

REMITTANCE COPY

PLEASE RETURN THIS REMITTANCE COUPON WITH YOUR PAYMENT



300 Broadacres Drive, 4th Floor
 Bloomfield, NJ 07003
 TEL: (973) 780-0100
 FAX: (973) 338-8885

- Check box for account information changes. See reverse side of billing statement.
- Check box for Automatic Payment Plan form.

Please indicate amount enclosed:

\$.

Checks are payable to:

Vision Inc.
 P.O. Box 1405
 Butler, NJ 07405-1405

Allison Smith

Account # :
 Due Date :

04745
 10/25/08

Total Amount Due : \$ 97226.66

Remittance slip is prefilled and
 addressed for customer's convenience

Please print your account number on the check.
 Allow 5-7 days for mailing to ensure payment is delivered by the due date.



7070047458 972266664

REMITTANCE NOTICE



300 Broadacres Drive, 4th Floor
Bloomfield, NJ 07003
TEL: (973) 780-0100
FAX: (973) 338-8885

www.vision.com



QTY ORDER	UNIT EACH	QTY BACK	QTY SHIPPED	PROD CODE	DESCRIPTION	TOTAL COST
57	Box	7	50	91	DOORKNOBS	2872.50
71	Pod	5	66	893	CELLOPHANE - BLUE	622.38
33	Bag	1	32	416	WIDGETS - LARGE	2998.08
81	Doz	1	80	517	TOENAIL CLIPPERS	7642.40
77	Ea	4	73	118	CELLOPHANE - RED	846.07
3	Box	2	1	632	WIDGETS - LARGE	78.02
61	Pod	6	55	718	CELLOPHANE - PLAID	2288.55
3	Bag	7	-4	185	CELLOPHANE - BLUE	-331.96
41	Doz	1	40	439	CELLOPHANE - BLUE	3750.80
85	Ea	2	83	603	CELLOPHANE - BLUE	6792.72
14	Box	8	6	184	WIDGETS - MEDIUM	137.82
92	Pod	3	89	778	WIDGETS - SMALL	7567.67
7	Bag	0	7	55	BALLS - PING-PONG	359.59
27	Doz	1	26	406	BOLTS - LIGHTNING	1761.50
83	Ea	1	82	132	HOOD ORNAMENTS	819.18
18	Box	5	13	965	WIDGETS - MEDIUM	480.48
0	Pod	9	-9	95	DOORKNOBS	-505.44
68	Bag	9	59	595	WIDGETS - LARGE	3796.06
35	Doz	1	34	364	CELLOPHANE - PLAID	802.40
56	Ea	6	50	868	WIDGETS - LARGE	2403.00

INVOICE #	02880
CUSTOMER#	08160
SALES REP#	09168
INVOICE DATE	10/20/08
SHIP DATE	10/25/08

**John Dunne
Gifts Galore
Northside Mall
Ann Arbor, MI 06123-1115**

Total	45181.82
Less 10% Discoun	4518.18
Plus Sales Ta	3162.73
Plus Shipping / Handlin	24.00
INVOICE GRAND TOTAL	48368.55

We notice you have ordered CELLOPHANE-BLUE. All cellophane rolls are 25% off thru December 31st.

REMITTANCE COPY

PLEASE RETURN THIS REMITTANCE COUPON WITH YOUR PAYMENT



300 Broadacres Drive, 4th Floor
Bloomfield, NJ 07003
TEL: (973) 780-0100
FAX: (973) 338-8885

- Check box for account information changes. See reverse side of billing statement.
- Check box for Automatic Payment Plan form.

Please indicate amount enclosed:

\$

Checks are payable to:

**Vision Inc.
P.O. Box 1405
Butler, NJ 07405-1405**



John Dunne

Account # : 08160
Due Date : 10/25/08

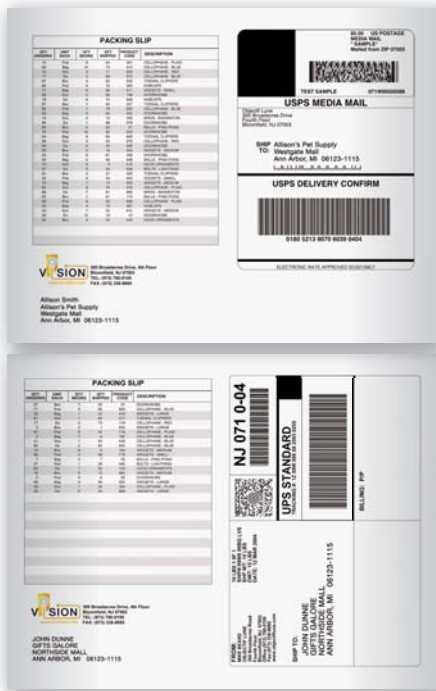
Total Amount Due : \$ 48368.55

Please print your account number on the check.
Allow 5-7 days for mailing to ensure payment is delivered by the due date.

7070081608 972266664



Pick Ticket & Shipping Label

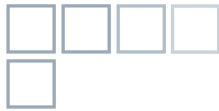
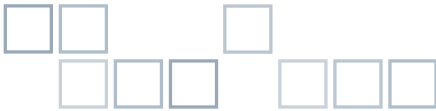


- Increase shipping document workflow efficiency
- Eliminate re-keying information to print shipping labels
- Print Pick Ticket and Shipping Label together on the same printer/MFP (even on the same page, at the same time)
- Eliminate the need to manually match them up

Reduce forms costs and automatically match labels to pick tickets!

Often times companies print a pick ticket at the warehouse then have to re-enter the customer information into another system to generate a shipping label.

With PlanetPress Suite, the same data originally used to print the invoice is now sent to the warehouse (minus prices and with the scale and rotation changed) to print out a combined packing slip and shipping label, thus eliminating the error prone process of manually matching them up.



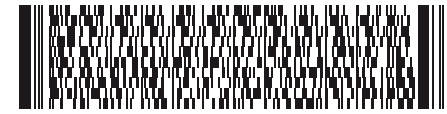
Raw DATA - Before

OBJECTIF LUNE 300 BROADACRES DRIVE 4th Floor BLOOMFIELD, NJ 07003 973-780-0100			10/25/00 04745 03452 01049 ABC USPS 10/20/00				
Allison's Pet Supply Westgate mall Ann Arbor, MI 12206-0000 Allison Smith smitha@noname.com							
70	64	6	391	CELLOPHANE - PLAID	Pod	81.00	5184.00
83	73	10	613	CELLOPHANE - BLUE	Bag	74.47	5436.31
16	11	5	826	CELLOPHANE - RED	Doz	16.52	181.72
77	68	9	970	CELLOPHANE - BLUE	Ea	95.30	6480.40
97	92	5	635	TOENAIL CLIPPERS	Box	14.46	1330.32
85	76	9	285	HUBCAPS	Pod	20.00	1520.00
77	68	9	511	WIDGETS - SMALL	Bag	80.83	5496.44
98	96	2	746	DOORKNOBS	Doz	60.18	5777.28
78	70	8	836	HUBCAPS	Ea	61.65	4315.50
67	60	7	337	TOENAIL CLIPPERS	Box	80.60	4836.00
85	78	7	822	CELLOPHANE - BLUE	Pod	31.71	2473.38
63	60	3	655	DOORKNOBS	Bag	9.94	596.40
15	10	5	295	BIRDS - BADMINTON	Doz	25.44	254.40
89	88	1	479	DOORKNOBS	Ea	4.06	357.28
84	82	2	57	BALLS - PING-PONG	Box	89.40	7330.80
76	66	10	554	DOORKNOBS	Pod	68.10	4494.60
94	86	8	809	TOENAIL CLIPPERS	Bag	16.81	1445.66
96	93	3	878	CELLOPHANE - RED	Doz	1.17	108.81
54	45	9	628	DOORKNOBS	Ea	0.45	20.25
20	18	2	505	WIDGETS - MEDIUM	Box	58.42	1051.56
93	87	6	456	DOORKNOBS	Pod	96.62	8405.94
93	88	5	608	BALLS - PING-PONG	Bag	36.20	3185.60
13	8	5	516	HOOD ORNAMENTS	Doz	70.67	565.36
37	34	3	838	BOLTS - LIGHTNING	Ea	93.05	3163.70
31	27	4	325	TOENAIL CLIPPERS	Box	50.69	1368.63
52	43	9	644	WIDGETS - SMALL	Pod	7.76	333.68
15	14	1	853	WIDGETS - MEDIUM	Bag	28.46	398.44
82	76	6	279	CELLOPHANE - PLAID	Doz	70.88	5386.88
88	81	7	806	BIRDS - BADMINTON	Ea	44.19	3579.39
62	61	1	173	BALLS - PING-PONG	Box	85.65	5224.65
63	55	8	839	CELLOPHANE - PLAID	Pod	90.63	4984.65
23	19	4	987	HUBCAPS	Bag	69.96	1329.24
42	35	7	615	WIDGETS - MEDIUM	Doz	41.79	1462.65
29	19	10	12	DOORKNOBS	Ea	15.85	301.15
63	54	9	449	HOOD ORNAMENTS	Box	47.05	2540.70

PACKING SLIP

QTY ORDERED	UNIT EACH	QTY BKORD	QTY SHIPPED	PRODUCT CODE	DESCRIPTION
70	Pod	6	64	391	CELLOPHANE - PLAID
83	Bag	10	73	613	CELLOPHANE - BLUE
16	Doz	5	11	826	CELLOPHANE - RED
77	Ea	9	68	970	CELLOPHANE - BLUE
97	Box	5	92	635	TOENAIL CLIPPERS
85	Pod	9	76	285	HUBCAPS
77	Bag	9	68	511	WIDGETS - SMALL
98	Doz	2	96	746	DOORKNOBS
78	Ea	8	70	836	HUBCAPS
67	Box	7	60	337	TOENAIL CLIPPERS
85	Pod	7	78	822	CELLOPHANE - BLUE
63	Bag	3	60	655	DOORKNOBS
15	Doz	5	10	295	BIRDS - BADMINTON
89	Ea	1	88	479	DOORKNOBS
84	Box	2	82	57	BALLS - PING-PONG
76	Pod	10	66	554	DOORKNOBS
94	Bag	8	86	809	TOENAIL CLIPPERS
96	Doz	3	93	878	CELLOPHANE - RED
54	Ea	9	45	628	DOORKNOBS
20	Box	2	18	505	WIDGETS - MEDIUM
93	Pod	6	87	456	DOORKNOBS
93	Bag	5	88	608	BALLS - PING-PONG
13	Doz	5	8	516	HOOD ORNAMENTS
37	Ea	3	34	838	BOLTS - LIGHTNING
31	Box	4	27	325	TOENAIL CLIPPERS
52	Pod	9	43	644	WIDGETS - SMALL
15	Bag	1	14	853	WIDGETS - MEDIUM
82	Doz	6	76	279	CELLOPHANE - PLAID
88	Ea	7	81	806	BIRDS - BADMINTON
62	Box	1	61	173	BALLS - PING-PONG
63	Pod	8	55	839	CELLOPHANE - PLAID
23	Bag	4	19	987	HUBCAPS
42	Doz	7	35	615	WIDGETS - MEDIUM
29	Ea	10	19	12	DOORKNOBS
63	Box	9	54	449	HOOD ORNAMENTS

\$0.00 US
MEDIA MAIL
* SAMPLE*
Mailed from ZIP 07003



TEST SAMPLE

071W00500588

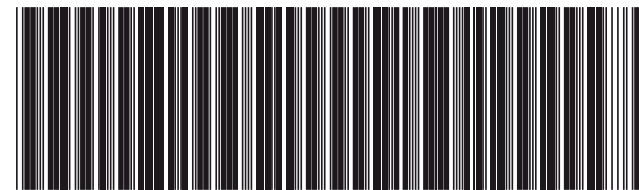
USPS MEDIA MAIL

Objectif Lune
300 Broadacres Drive
Fourth Floor
Bloomfield, NJ 07003

SHIP Allison's Pet Supply
TO: Westgate Mall
Ann Arbor, MI 06123-115



USPS DELIVERY CONFIRM



0180 5213 9070 6039 0404

ELECTRONIC RATE APPROVED SCG2139C7



300 Broadacres Drive, 4th Floor
Bloomfield, NJ 07003
TEL: (973) 780-0100
FAX: (973) 338-8885

Allison Smith
Allison's Pet Supply
Westgate mall
Ann Arbor, MI 06123-1115

Eliminates matching of packing slips and shipping labels, no more mis-shipments

Shipping label created automatically from info in the datastream

By reformatting the data and removing the prices, a pick list is created for use by the warehouse

PACKING SLIP

QTY ORDERED	UNIT EACH	QTY BKORD	QTY SHIPPED	PRODUCT CODE	DESCRIPTION
57	Box	7	50	91	DOORKNOBS
71	Pod	5	66	893	CELLOPHANE - BLUE
33	Bag	1	32	416	WIDGETS - LARGE
81	Doz	1	80	517	TOENAIL CLIPPERS
77	Ea	4	73	118	CELLOPHANE - RED
3	Box	2	1	632	WIDGETS - LARGE
61	Pod	6	55	718	CELLOPHANE - PLAID
3	Bag	7	-4	185	CELLOPHANE - BLUE
41	Doz	1	40	439	CELLOPHANE - BLUE
85	Ea	2	83	603	CELLOPHANE - BLUE
14	Box	8	6	184	WIDGETS - MEDIUM
92	Pod	3	89	778	WIDGETS - SMALL
7	Bag	0	7	55	BALLS - PING-PONG
27	Doz	1	26	406	BOLTS - LIGHTNING
83	Ea	1	82	132	HOOD ORNAMENTS
18	Box	5	13	965	WIDGETS - MEDIUM
0	Pod	9	-9	95	DOORKNOBS
68	Bag	9	59	595	WIDGETS - LARGE
35	Doz	1	34	364	CELLOPHANE - PLAID
56	Ea	6	50	868	WIDGETS - LARGE



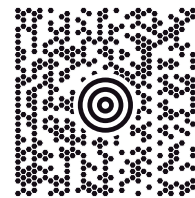
300 Broadacres Drive, 4th Floor
 Bloomfield, NJ 07003
 TEL: (973) 780-0100
 FAX: (973) 338-8885

John Dunne
 Gifts Galore
 Northside Mall
 Ann Arbor, MI 06123-1115

FROM:
 MIKE BEARD
 OBJECTIF LUNE
 300 Broadacres Road
 Fourth Floor
 Bloomfield, NJ 07003
 Office:(973) 780-0100
 Fax:(973) 338-8885
 www.objectiflune.com

SHIP TO:
 John Dunne
 Gifts Galore
 Northside Mall
 Ann Arbor, MI 06123-1115

10 LBS 1 OF 1
 SHIP#:99W8 86BQ LVS
 SHP WT: 10 LBS
 DWT: 15 LBS
 DATE: 12 MAR 2004



NJ 071 0-04



UPS STANDARD
 TRACKING #: 1Z 99W 886 68 2593 0255



BILLING: P/P



Personalized Letters



- Fully personalize your promotional letters with much more than just a name and address.
- Perform a mail merge without network congestion issues.
- Print personalized letters much faster.

Generate a personalized letter for your customer with a thank you message or special offer that is currently available on items related to their purchases. In addition to variable text, PlanetPress Design is capable of conditional imaging. This allows, for example, to dynamically include the signature of the customer's specific sales rep. You can go even further with more advanced functions like dynamic graphing.

Network congestion is no longer an issue since PlanetPress Suite loads to the printer/MFP all the images once and then sends the names and addresses. This makes for a much faster printing process. With the addition of postal sorting software, the addresses can be pre-sorted for postal discounts and checked for accuracy.

Also, in a traditional mail merge, if the printer jams or crashes, there is no easy way to reprint from the middle of the job. PlanetPress Suite can resend the job from any starting point.



Raw DATA - Before

OBJECTIF LUNE		10/25/00				
300 BROADACRES DRIVE		04745				
4th Floor		03452				
BLOOMFIELD, NJ 07003		01049				
973-780-0100		ABC				
		USPS				
		10/20/00				
Allison's Pet Supply						
Westgate mall						
Ann Arbor, MI						
12206-0000						
Allison Smith						
smitha@noname.com						
70	64	6	391 CELLOPHANE - PLAID	Pod	81.00	5184.00
83	73	10	613 CELLOPHANE - BLUE	Bag	74.47	5436.31
16	11	5	826 CELLOPHANE - RED	Doz	16.52	181.72
77	68	9	970 CELLOPHANE - BLUE	Ea	95.30	6480.40
97	92	5	635 TOENAIL CLIPPERS	Box	14.46	1330.32
85	76	9	285 HUBCAPS	Pod	20.00	1520.00
77	68	9	511 WIDGETS - SMALL	Bag	80.83	5496.44
98	96	2	746 DOORKNOBS	Doz	60.18	5777.28
78	70	8	836 HUBCAPS	Ea	61.65	4315.50
67	60	7	337 TOENAIL CLIPPERS	Box	80.60	4836.00
85	78	7	822 CELLOPHANE - BLUE	Pod	31.71	2473.38
63	60	3	655 DOORKNOBS	Bag	9.94	596.40
15	10	5	295 BIRDS - BADMINTON	Doz	25.44	254.40
89	88	1	479 DOORKNOBS	Ea	4.06	357.28
84	82	2	57 BALLS - PING-PONG	Box	89.40	7330.80
76	66	10	554 DOORKNOBS	Pod	68.10	4494.60
94	86	8	809 TOENAIL CLIPPERS	Bag	16.81	1445.66
96	93	3	878 CELLOPHANE - RED	Doz	1.17	108.81
54	45	9	628 DOORKNOBS	Ea	0.45	20.25
20	18	2	505 WIDGETS - MEDIUM	Box	58.42	1051.56
93	87	6	456 DOORKNOBS	Pod	96.62	8405.94
93	88	5	608 BALLS - PING-PONG	Bag	36.20	3185.60
13	8	5	516 HOOD ORNAMENTS	Doz	70.67	565.36
37	34	3	838 BOLTS - LIGHTNING	Ea	93.05	3163.70
31	27	4	325 TOENAIL CLIPPERS	Box	50.69	1368.63
52	43	9	644 WIDGETS - SMALL	Pod	7.76	333.68
15	14	1	853 WIDGETS - MEDIUM	Bag	28.46	398.44
82	76	6	279 CELLOPHANE - PLAID	Doz	70.88	5386.88
88	81	7	806 BIRDS - BADMINTON	Ea	44.19	3579.39
62	61	1	173 BALLS - PING-PONG	Box	85.65	5224.65
63	55	8	839 CELLOPHANE - PLAID	Pod	90.63	4984.65
23	19	4	987 HUBCAPS	Bag	69.96	1329.24
42	35	7	615 WIDGETS - MEDIUM	Doz	41.79	1462.65
29	19	10	12 DOORKNOBS	Ea	15.85	301.15
63	54	9	449 HOOD ORNAMENTS	Box	47.05	2540.70



300 Broadacres Drive, 4th Floor
Bloomfield, NJ 07003
TEL: (973) 780-0100
FAX: (973) 338-8885

Shipping address is utilized to send a promotional letter

Allison Smith
Allison's Pet Supply
Westgate mall
Ann Arbor, MI
06123-1115



Postnet barcode is added for reduced mailing costs

Dear Allison,

My sincere thanks to you for purchasing from the Objectif Lune Group. We hope that you are satisfied with the quality of our services and products.

We noticed that you purchased a **line printer ribbon** with your **last order**. We thought that you might be interested in a **laser printer promotion** that we are currently offering. You can experience improved print quality, increased speed and decreased cost by upgrading your current technology. Please visit us at www.ol.vision.com/specialoffer or call us at (973) 780-0100 ext 243.

Our main concern is your satisfaction, so please do not hesitate to call me with any questions, comments or concerns that you might have.

Sincerely yours,

Set conditions that market appropriate products to the customer based on their recent purchases. In this case, when the product code for a line printer ribbon is found in the data stream, a letter with a special offer for a new low cost laser printer is produced.

Michael Lord
Michael Lord
Managing Director

Personalized signature from specific sales rep for this customer

DESCRIPTION
Line printer ribbon

DESCRIPTION	QTY	UNIT PRICE	TOTAL PRICE
Line printer ribbon	1	100.00	100.00

REMITTANCE COPY

VISION
300 Broadacres Drive, 4th Floor
Bloomfield, NJ 07003
TEL: (973) 780-0100
FAX: (973) 338-8885

Account # Allison H Smith
Due Date 10/25/00
Total Amount Due \$ 97229.66

Check or payable to: VISION
P.O. Box 1405
Bloomfield, NJ 07003-1405

70700*7458 *97226664 REMITTANCE NOTICE



300 Broadacres Drive, 4th Floor
Bloomfield, NJ 07003
TEL: (973) 780-0100
FAX: (973) 338-8885

Jonh Dunne
Gifts Galore
Northside Mall
Ann Arbor, MI
06123-1115



Dear John,

My sincere thanks to you for purchasing from the Objectif Lune Group. We hope that you are satisfied with the quality of our services and products.

We noticed that you purchased [widgets](#) with your last order. We are currently offering [25% off on Widget Accessory Kits](#). Experience the ease and convenience of having all of your accessories in one place! Please visit us at www.ol.vision.com/specialoffer or call us at (973) 780-0100 ext 243.

Our main concern is your satisfaction, so please do not hesitate to call me with any questions, comments or concerns that you might have.

Sincerely yours,

Michael Lord
Managing Director



TransPromo Invoice



Turn your invoices into full advertising vehicles with no changes to your host system:

- Include information on a related product to what was just purchased in order to drive additional revenue.
- Automatically include printed information that accompanies a purchased product or service (e.g. Specific growing instructions for Tulips that the customer purchased with the invoice.).

With no change to the host system, easily transform your invoices into advertising vehicles, making the most of the dollars spent on postage already. There is a goldmine of information within your existing invoice print stream that can be used to help you build a better relationship with your customers and sell more!

With minimal initial set up, targeted messages, graphics or pages can be printed based upon information found within the data:

- Add coupons or messages about related items or service contracts based on line items in the invoice.
- Change Terms and Conditions on the reverse of the invoice based on destination or customer type.
- Add a full page targeted color ad based on customer ordering patterns.

Personalization of documents has been proven time and again to increase response rates.

Greatly increased workflow efficiencies can also be realized:

- Eliminate pre-printed forms that have to be printed on impact printers, burst and decollated, then distributed via interoffice or outside mail.
- Automatically route data to the appropriate departments to print the accounting copy in accounting, the pick tickets and shipping labels in the warehouse, and the customer copy in the mail room or data center.
- Automatically generate an electronic copy along with an index file for archive.
- Email a copy or notice to the customer that their order is being processed, and/or send a fax confirmation - all automatically and simultaneously.



Raw DATA - Before

Mr. William Winger 8017 Edwood Rd Rutherford NJ 070705614 17 8 S002 1 1 *****AUTO**5-DIGIT 07070 4010 1056 5689 8940	Invoice Number: 416000 Type: Gold Cell Phone Number: 9735552621 Offer Code: QWERTY
Calls	Mins
654-555-6680	38
671-555-3835	72
885-555-5195	63
238-555-2625	65
753-555-9093	76
273-555-8977	7
516-555-3593	27
487-555-8463	25
351-555-9911	83
766-555-6060	68
478-555-9479	38
905-555-3191	93
811-555-3654	70
987-555-2771	27
167-555-7362	63
983-555-7363	44
911-555-5046	23
501-555-4645	49
412-555-3064	53
770-555-5298	91
589-555-6868	54
178-555-8887	91
501-555-5717	83
269-555-7255	3
891-555-7484	51
471-555-8421	21
802-555-5350	55
688-555-1590	0
591-555-6249	24
468-555-4154	42
534-555-2690	68



Key fields can be indexed for retrieval of the invoice from a document management system, (enables quick lookup of the form)

Marketing messages can be targeted based on your customer's info


Your monthly ObjectifLune Telecom Inc. invoice summary

Phone Number:	9735552621
Invoice Number:	416000
Account Type:	Gold
Total Minutes:	1567 min.
Plan Rate:	\$0.10 per min.
Total Amount Due:	\$156.70

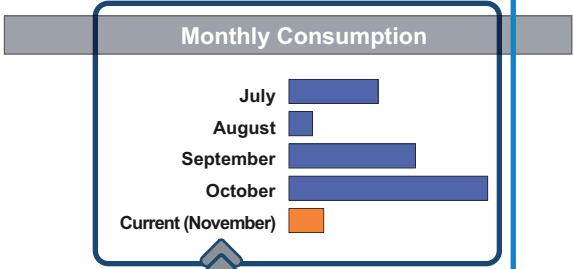
Congratulations Mr. Winger!

You are eligible for a **FREE** mobile phone upgrade.

Contact our Customer Service for more details.



Calls	Mins.	Calls	Mins.
654-555-6680	38	471-555-8421	21
671-555-3835	72	802-555-5350	55
885-555-5195	63	688-555-1590	0
238-555-2625	65	591-555-6249	24
753-555-9093	76	468-555-4154	42
273-555-8977	7	534-555-2690	68
516-555-3593	27		
487-555-8463	25		
351-555-9911	83		
766-555-6060	68		
478-555-9479	38		
905-555-3191	93		
811-555-3654	70		
987-555-2771	27		
167-555-7362	63		
983-555-7363	44		
911-555-5046	23		
501-555-4645	49		
412-555-3064	53		
770-555-5298	91		
589-555-6868	54		
178-555-8887	91		
501-555-5717	83		
269-555-7255	3		
891-555-7484	51		



Data driven bar charts concisely illustrate usage summary

Benefit from more savings!

Did you know that as a **Gold** customer, you could benefit from a **15% discount** on all accessories for your mobile phone?

Visit our online store for more information.

www.objectiflune.com/eshop

Transactional data can be moved, reformatted, rotated, stripped down or duplicated to suit the form

Barcodes with info such as Invoice Number and Amount can be added for scanning

Mr. William Winger
8017 Edwood Rd
Rutherford, NJ 070705614



PostNet barcodes for mailing discounts

Invoice Number
416000

Cell Phone Number
9735552621

Total Minutes
1567

Amount Paid



Services Agreement - Terms & Conditions

The following constitutes a summary of the terms and conditions set forth in the Services Contract governing the actual contractual relation between Objectif Lune Telecom Inc. and the customer. The customer may request a copy of the Services Contract from Objectif Lune Telecom Inc. by contacting Objectif Lune Telecom Inc.'s Customer Service department or via the Objectif Lune Telecom Inc. corporate web site at www.objectiflune.com.

1.Objectif Lune Telecom Inc. may, upon at least thirty (30) days' prior notice to such effect sent by mail to the customer, modify the Services or any other proObjectif Lune Telecom Inc. of this agreement, including the charges and rates. However, no prior notice shall be required with regard to a modification of Services if Objectif Lune Telecom Inc.'s services offerings remain similar and have no impact on the charges payable by the customer. It is expressly understood that certain services, or their replacement by other similar services, are offered as part of a package deal and that changes to these services do not necessarily entail an adjustment of the charges and rates. By settling the statement of account accompanying any notice of modification to this agreement, the customer is irrevocably deemed to have accepted the modifications. However, the customer may, within such thirty (30) days delay, cancel this agreement or request that it be modified, failing which the customer shall irrevocably be deemed to have accepted the modifications covered by the notice.

2.Subject to the proObjectif Lune Telecom Inc.s set out below, this agreement shall come into force on the Effective Date and shall have a minimum term of thirty (30) days, which shall be automatically renewed for additional successive periods of thirty (30) days. The customer may at any time, upon at least thirty (30) days' prior notice to Objectif Lune Telecom Inc., cancel this agreement or ask Objectif Lune Telecom Inc. for a subscription to another category of Services.

3.If the subscription is part of a sales promotion offered by Objectif Lune Telecom Inc. whereby the customer enjoys lower rates than would have been the case without such sales promotion, the subscription shall be for the period covered by the sales promotion (the "Sales Promotion Period") and may not be cancelled before such period ends. Upon expiry of the Sales Promotion Period, the subscription shall be automatically renewed under the same conditions or at the regular rate in effect for this type of subscription in accordance with the conditions of such sales promotion, unless Objectif Lune Telecom Inc. receives a notice of non-renewal from the customer within ten (10) days preceding the expiry of the Sales Promotion Period.

4.Should the customer cancel a subscription contracted as part of a sales promotion before the expiry date of the Sales Promotion Period, the customer shall pay Objectif Lune Telecom Inc. as damages the penalties indicated in the contract.

5.Charges shall be payable on the due date indicated on the account statement sent to the customer (by mail or electronically), by authorized payment debited from the customer's account or by pre-authorized payment charged to the customer's credit card. If the charges remain unpaid following the due date, they shall bear interest at the rate of 2% per month (24% per annum) calculated and compounded daily as of the due date. As long as charges remain unpaid, Objectif Lune Telecom Inc. shall issue an account statement on a monthly basis. Any partial payment made by the customer will first be applied to the accrued interest, then the unpaid capital, starting with the overdue amounts due the earliest with respect to the payment date.

6.The customer shall not rent, transfer or lend the Equipment or permit use of the Services for personal gain or purposes of public representation.

7.The customer may not connect the Equipment to a number of TV sets or receivers greater than the number indicated in the specifications or proceed to install additional outlets, failing which the customer shall be liable to civil and criminal sanctions. The Equipment may not be transported to a location other than that mentioned in the Specifications, without prior written authorization of Objectif Lune Telecom Inc.. The customer undertakes not to connect to the Service a number of cell phones greater than the number agreed in the Specifications, without the prior consent of Objectif Lune Telecom Inc.. The law forbids receipt of services or portion of services without having paid for them, except with the written prior consent of Objectif Lune Telecom Inc.. Any departure from the law may lead to civil or criminal sanctions.

8.Administration charges shall be billed to the customer for any cheque returned due to insufficient funds, for each pre-authorized payment refused by the customer's financial institution or for any debit from the customer's credit card not authorized by the issuing institution.

9.In case of interruption of the Services attributable to any cause whatsoever other than the customer's fault, Objectif Lune Telecom Inc.'s liability shall be limited to crediting upon written request by the customer, the minimum charges proportionally to the duration of the interruption in relation to the total period for which the customer must pay minimum charges, calculated on an hourly basis, provided the following conditions are met: i) the customer has notified Objectif Lune Telecom Inc. in writing; ii) for Services other than Video on Movies on Demand, the interruption lasted for a period of at least forty-eight (48) consecutive hours after the notice and iii) the customer has sent a written request for credit to Objectif Lune Telecom Inc. within fifteen (15) days following such notice.

10.Any Equipment sold to the customer shall be warranted against any manufacturing defect for a period of one (1) year for parts and labor. The customer may choose to purchase the extended warranty offered by Objectif Lune Telecom Inc. on the Equipment sold to the customer, as long as the extended warranty is offered by Objectif Lune Telecom Inc. for such Equipment, as determined by Objectif Lune Telecom Inc.. The warranty period shall be calculated from the Effective Date. Objectif Lune Telecom Inc. shall replace the defective Equipment by identical equipment or another model in accordance with the terms of the warranty, provided the customer notifies Objectif Lune Telecom Inc. of the defect within the warranty period. Notwithstanding the foregoing, the warranty does not apply to any breakage or defect resulting from accidents of force majeure, modifications to the Equipment by the customer without Objectif Lune Telecom Inc.'s prior written authorization, misuse or abuse of the Equipment. In case of defective Equipment, the customer agrees to notify Objectif Lune Telecom Inc. promptly so that a duly authorized representative of Objectif Lune Telecom Inc. can make the necessary inspection.



Payments are accepted at most financial institutions. Please return this portion with your payment.

LATE PAYMENT CHARGE
A late payment charge of 2% will be added each month to the unpaid balance, starting on the day following the due date.

REMITTANCE CENTER
Objectif Lune Telecom Inc.
300 Broadacres Drive
Bloomsfield, NJ, 070003

Receipt Stamp



Objectif Lune Telecom Inc.
 300 Broadacres Drive
 Bloomsfield, NJ, 07003
 (973) 780-0100
www.objectiflune.com

Your monthly Objectif Lune Telecom Inc.  invoice summary

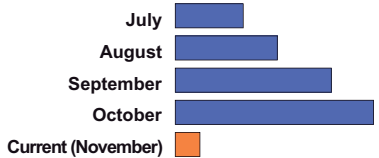
Phone Number: 9735552621
 Invoice Number: 245143
 Account Type: Platinum
 Total Minutes: 736 min.
 Plan Rate: \$0.05 per min.
 Total Amount Due: \$36.80

Congratulations Mrs. Zaiger!

You have won a **FREE** mobile phone and **1000 FREE** minutes!

Contact our Customer Service for more details.



Calls	Mins.	Calls	Mins.	Monthly Consumption
783-555-8506	70			
222-555-9383	72			
710-555-9203	10			
280-555-6056	65			
430-555-5343	77			
530-555-4798	49			
123-555-8996	51			
611-555-2754	37			
652-555-4800	94			
230-555-3385	24			
597-555-9990	38			
279-555-4413	44			
485-555-4165	60			
202-555-9256	11			
766-555-8589	34			

Benefit from more savings!

Did you know that as a **Platinum** customer, you could benefit from a **25%** discount on all accessories for your mobile phone?

Visit our online store for more information.

www.objectiflune.com/eshop



Invoice Number
245143

Cell Phone Number
 9735552621

Total Minutes
 736

Amount Paid

Mrs. Ruth Zaiger
 518 Neola Dr
 Rutherford, NJ 070702277



Services Agreement - Terms & Conditions

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4.Should the customer cancel a subscription contracted as part of a sales promotion before the expiry date of the Sales Promotion Period, the customer shall pay Objectif Lune Telecom Inc. as damages the penalties indicated in the contract.

5.Charges shall be payable on the due date indicated on the account statement sent to the customer (by mail or electronically), by authorized payment debited from the customer's account or by pre-authorized payment charged to the customer's credit card. If the charges remain unpaid following the due date, they shall bear interest at the rate of 2% per month (24% per annum) calculated and compounded daily as of the due date. As long as charges remain unpaid, Objectif Lune Telecom Inc. shall issue an account statement on a monthly basis. Any partial payment made by the customer will first be applied to the accrued interest, then the unpaid capital, starting with the overdue amounts due the earliest with respect to the payment date.

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8.Administration charges shall be billed to the customer for any cheque returned due to insufficient funds, for each pre-authorized payment refused by the customer's financial institution or for any debit from the customer's credit card not authorized by the issuing institution.

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10.Any Equipment sold to the customer shall be warranted against any manufacturing defect for a period of one (1) year for parts and labor. The customer may choose to purchase the extended warranty offered by Objectif Lune Telecom Inc. on the Equipment sold to the customer, as long as the extended warranty is offered by Objectif Lune Telecom Inc. for such Equipment, as determined by Objectif Lune Telecom Inc.. The warranty period shall be calculated from the Effective Date. Objectif Lune Telecom Inc. shall replace the defective Equipment by identical equipment or another model in accordance with the terms of the warranty, provided the customer notifies Objectif Lune Telecom Inc. of the defect within the warranty period. Notwithstanding the foregoing, the warranty does not apply to any breakage or defect resulting from accidents of force majeure, modifications to the Equipment by the customer without Objectif Lune Telecom Inc.'s prior written authorization, misuse or abuse of the Equipment. In case of defective Equipment, the customer agrees to notify Objectif Lune Telecom Inc. promptly so that a duly authorized representative of Objectif Lune Telecom Inc. can make the necessary inspection.



Payments are accepted at most financial institutions. Please return this portion with your payment.

LATE PAYMENT CHARGE
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REMITTANCE CENTER
Objectif Lune Telecom Inc.
300 Broadacres Drive
Bloomsfield, NJ, 070003

Receipt Stamp



Check with Explanation of Benefits



- Reduce security concerns when printing checks.
- Create an EOB formatted exactly the way you need it to be.
- Eliminate the need for expensive check stock with a pre-printed MICR line (for MICR printers only).
- Add targeted, personalized messages and information.
- No longer rely on noisy, high maintenance impact printers.

PlanetPress Design can have the MICR font installed as a TrueType font. The incrementing check number can be maintained on the printer/MFP hard drive, enabling the printing of unique check numbers, simulating the expensive pre-printed incrementing check number. The check stock could also be Z-fold self-mailer stock reducing the post process labor costs.

In addition, check-printing security can be greatly enhanced:

- The check “form” is an ASCII file (PostScript) that can be placed on the UNIX host. NOT in the printer/MFP. When a check run is initiated, under UNIX security access, the check form is concatenated to the check data and sent to the printer/MFP. After the print run the form is deleted off the printer/MFP. This way there is no check stock with MICR line available for unauthorized printing.
- PlanetPress Suite can automate the periodic output of a report of all checks printed to reconcile against the accounting system to monitor possible fraudulent check printing.
- The check payee, account number and/or amount can be printed at a forty five (45) degree angle on the check multiple times as a background, making changing the check almost impossible.



Raw DATA - Before

```

OLG010003422000001CLMXXX-XX-0213000 ONE THOUSAND TWO HUNDRED THREE AND 00/100
03/12/03 1203.00 CHARLES BRUNS 125-56
929 WILLOW ROAD WOODBURN NY 07333
0002123654998
1 096456

OLG0100034230000002CLXXX-XX-3428000 SAMANTHA DOUGHERTY
00
027463 10/01/06 SAMANTHA DOUGHERTY .00 507.00 .00 19
9 STAR ROAD
LAKESVILLE WI 63256
.00

OLG0100034240000003CMXXX-XX-963506/28/04 302.00 .00 .00 .00
.00 .00 .00 .00 .00 2
.00 CHRIS PATERSON .00 32156 302.00 .00 302.00
.00 .00
0002568974333

MORRIS BROWN
OLG0100034251000001CLXXX-XX-1163000 ONE HUNDRED FORTY AND 00/100
09/19/02 140.00 000555489 123-95
100 HUDSON STREET BRONX NY 36985
11-215469 00
1 36985

OLG0100034261000002CALXXX-XX-2125000 WILLIAM HARRISON 00
03/25/01 WILLIAM HARRISON 1253.00 09845634
326 GROVE STREET BROWNSVILLE NY .00 1253.00 .00 12
.00 36984

OLG0100034271000003CAMXXX-XX--2532000 32156 03/12/05 .00 .00
.00 .00 .00

```

OLG OBJECTIF LUNE GROUP
300 BROADACRES DRIVE
BLOOMFIELD, NJ 07003
TEL: (973) 780-0100
FAX: (973) 338-8885
Affordable Security for Life!

MEMBER #027463 CLAIM NUMBER 113655986245

MEMBER # 3422

Variables, such as check amounts and check number, can be mapped to print exactly where they should

PAY FIVE HUNDRED SEVEN DOLLARS AND NO CENTS

LOCAL TRUST COMPANY 30 RIVERSIDE BLVD
NEW YORK, NY 20653

TO THE ORDER OF
CHARLES BRUNS
929 WILLOW ROAD
WOODBURN, NY 07333

DATE CHECK NUMBER CHECK AMOUNT
12/15/06 3422 \$1,203

PlanetPress Design can generate the MICR line for printers that support MICR toner

Also, special secure fonts can be used for the "written out" check amount

The signature can vary as per the data or even be omitted for certain amounts e.g. don't print a signature for amounts over \$5,000

Authorized Signatures
NOT VALID AFTER 90 DAYS

003422 987654221 2345678

PLEASE DETACH AT ABOVE PERFORATION

EXPLANATION OF BENEFITS

OLG OBJECTIF LUNE GROUP
300 BROADACRES DRIVE
BLOOMFIELD, NJ 07003
Affordable Security for Life!

MEMBER ▶ CHARLES BRUNS
MEMBER # ▶ 096456
PLAN # ▶ 125-56
PLAN TYPE ▶ DISABILITY

DATE OF ACCIDENT ▶ 03/12/03
CLAIM NUMBER ▶ 0002123654998
CHECK NUMBER ▶ 3422
DATE OF CHECK ▶ 12/15/06

Not only can the form be fully personalized based on information found in the data stream, the field labels on the form can vary based on the data as well

DATE OF CLAIM	BENEFIT AMOUNT	DEDUCTIBLE	NET AMOUNT	CLAIM TYPE	TOTAL BENEFIT PAID TO DATE
12/01/06	\$1,500	\$297	\$1,203	LONG TERM	\$51,000
PAIEMENT AMOUNT					\$1,203

PlanetPress Design's powerful box drawing tools can be used in combination with pre-printed check stock to create a visually pleasing and easy to understand layout

Variable personalized messages allow for an efficient way to get customer specific, important notices or reminders to the recipient

YOUR PAPER WORK NEEDS TO BE UPDATED:

Disability claims are only payable as long as you continue to see your appointed physician on the established schedule. Your next physician visit is with **Dr. Browning** on **December 9th**.

Questions? Contact Disability Claims Customer Service at 1-800-555-9299.

Based on data, such as type of claim or location, appropriate contact info is printed



3423

2-21
330



OBJECTIF LUNE GROUP
300 BROADACRES DRIVE
BLOOMFIELD, NJ 07003
TEL: (973) 780-0100
FAX: (973) 338-8885

MEMBER #027463

CLAIM NUMBER
113655986245

PAY FIVE HUNDRED SEVEN DOLLARS AND NO CENTS

LOCAL TRUST COMPANY 30 RIVERSIDE BLVD
NEW YORK, NY 20653

DATE	CHECK NUMBER	CHECK AMOUNT
12/15/06	3423	\$507

TO THE ORDER OF

SAMANTHA DOUGHERTY
9 STAR ROAD
LAKESVILLE WI 63256

Harry Jones
Authorized Signatures

⑈003423⑈ ⑆987654221⑆ 12345678⑈

NOT VALID AFTER 90 DAYS

PLEASE DETACH AT ABOVE PERFORATION

EXPLANATION OF BENEFITS



MEMBER SAMANTHA DOUGHERTY
MEMBER # 027463
PLAN # 149-03
PLAN TYPE ACCIDENT

DATE OF ACCIDENT 10/01/06
CLAIM NUMBER 1113655986245
CHECK NUMBER 3423
DATE OF CHECK 12/15/06

DATE OF CLAIM	BENEFIT AMOUNT	DEDUCTIBLE	NET AMOUNT	CLAIM TYPE	TOTAL BENEFIT PAID TO DATE
12/01/06	\$750	\$243	\$507	ACCIDENT	\$2,250
PAIEMENT AMOUNT					\$507

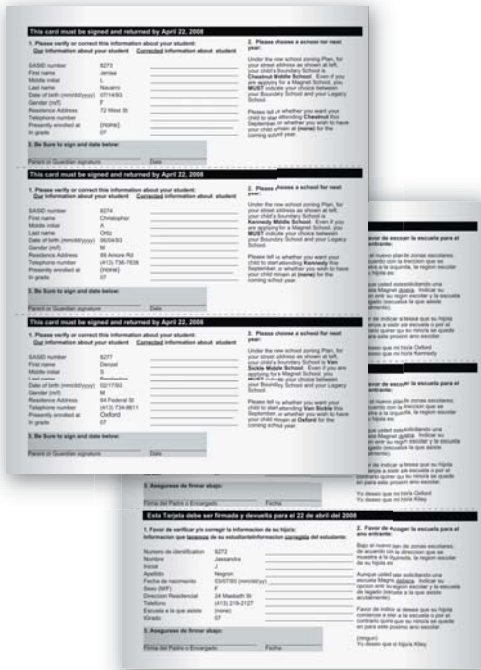
YOUR PAPER WORK NEEDS TO BE UPDATED:

All accident claims require an Accident Report form (AR120) on file. Our records indicate that you have not submitted one yet. Please call 1-800-555-9298 to have one mailed to you or download one at www.objectiflunegroup.com/forms

Questions? Contact Accident Claims Customer Service at 1-800-555-9298.



Bilingual Registration Verification



- Map transactional data.
- Have variables on both sides.
- Set conditions for variables to appear/not appear.
- Support multiple languages.

Easily create multi-up perforated slips for printing. With no change to the host system, map your customer's data onto the form in the appropriate formatting.

Since the data is being pulled directly from your host, the most updated information available is being printed on your form. This process is further automated by using information found in the existing data stream, (such as city or zip code) to automatically add information specific to the recipient.

N-up documents boost your efficiency! They are simple to create and it is easy for the recipient to understand and quickly locate the relevant information.



Raw DATA - Before

```
Data.txt - Bloc-notes
Fichier Edition Format Affichage ?
3-BOX; 9615; Jasmine; A; Hernandez; 05/08/93; M; 340 Dickinson St; (413) 546-9523; 5; (none); (none); (ningun);
3-BOX; 9615; Jacqueline; A; Hernandez; 05/02/94; M; 36 Berkeley St; (413) 546-9523; 5; (none); (none); (ningun);
3-BOX; 9615; Jasmine; J; Cerez; 05/02/94; M; 36 Berkeley St; (413) 581-3029; 5; (none); (none); (ningun); camp
3-BOX; 9615; Jaheel; J; Cerez; 05/01/94; M; 38 Lionel Benoit Rd; (413) 581-3029; 5; (none); (none); (ningun);
3-BOX; 9624; Jacqueline; Aviles; 05/01/94; F; 38 Lionel Benoit Rd; (413) 825-0825; 5; oxford; I want my chi
3-BOX; 9624; Ishaq; Aviles; 05/01/92; F; 402 Summer Ave; (413) 825-0825; 3; oxford; I want my child to attc
3-BOX; 9626; Iyawna; Ayala; 05/01/92; M; 402 Summer Ave; (413) 545-2418; 5; (none); (none); (ningun); kentuck
3-BOX; 9626; Ishaq; Ayala; 04/25/94; M; 44 Clark St; (413) 545-2418; 5; (none); (none); (ningun); kentucky; K
3-BOX; 9634; Iyawna; M; Allah; 04/25/94; M; 44 Clark St; (413) 546-5896; 5; (none); (none); (ningun); drummond
3-BOX; 9634; Ilesha; M; Allah; 04/11/94; M; 443 Tiffany St; (413) 546-5896; 5; (none); (none); (ningun); drum
3-BOX; 9635; Ilesha; R; Alvarado; 04/11/94; M; 443 Tiffany St; (413) 585-5445; 5; (none); (none); (ningun); G
3-BOX; 9640; Iberika; M; Brown; 04/11/94; F; 45 Adams St; (413) 532-2319; 5; (none); (none); (ningun); campbell
3-BOX; 9640; Francheska; M; Brown; 04/01/94; F; 49 Herman St; (413) 532-2319; 5; (none); (none); (ningun); cam
3-BOX; 9641; Iberika; A; Cahill; Manfredi; 04/01/94; M; 49 Herman St; (413) 531-5626; 5; (none); (none); (ning
3-BOX; 9641; Evan; A; Cahill; Manfredi; 03/26/93; M; 5 Newport St; (413) 531-5626; 5; (none); (none); (ningun)
3-BOX; 9643; Evan; Colon-Rivera; 02/26/93; M; 5 Newport St; (413) 588-9999; 5; (none); (none); (ningun); Gre
3-BOX; 9643; Eric; Colon-Rivera; 03/25/94; M; 503 Newbury St; (413) 588-9999; 5; (none); (none); (ningun); G
3-BOX; 9646; Evan; Figueroa; 03/25/94; F; 503 Newbury St; (413) 536-3023; 5; (none); (none); (ningun); washin
3-BOX; 9646; Eric; Figueroa; 03/19/94; F; 51 Jardine St; (413) 536-3023; 5; (none); (none); (ningun); washin
3-BOX; 9650; Denzel; M; Reyes; 05/19/94; F; 51 Jardine St; (413) 825-5839; 5; (none); (none); (ningun); van Ho
3-BOX; 9650; Deanna; M; Reyes; 05/18/94; F; 51 William Sands Jr Rd; (413) 825-5839; 5; (none); (none); (ningun); Gre
3-BOX; 9651; Denzil; M; Sanchez; 03/18/94; F; 51 William Sands Jr Rd; (413) 545-1802; 5; (none); (none); (ning
3-BOX; 9651; Deanna; M; Sanchez; 03/16/94; F; 52 West St; (413) 545-1802; 5; (none); (none); (ningun); washin
3-BOX; 9652; Denis; M; Santiago; 03/16/94; F; 52 West St; (413) 588-4525; 5; (none); (none); (ningun); campbe
3-BOX; 9652; Dayshia; M; Santiago; 03/15/94; F; 531 Bayonne St; (413) 588-4525; 5; (none); (none); (ningun); c
3-BOX; 9652; Evan; E; Harris; 03/15/94; F; 531 Bayonne St; (413) 546-1124; 5; (none); (none); (ningun); van Ho
3-BOX; 9652; Emanuel; E; Harris; 03/15/94; F; 54 Sylvan St; (413) 546-1124; 5; (none); (none); (ningun); van H
3-BOX; 9653; Emanuel; S; Harris; 03/15/94; M; 54 Sylvan St; (413) 546-1124; 5; (none); (none); (ningun); van H
3-BOX; 9653; Edward; S; Harris; 03/11/94; M; 56 Cleveland St; (413) 546-1124; 5; (none); (none); (ningun); van
3-BOX; 9654; Dayshia; M; Valderrama; 03/11/94; M; 56 Cleveland St; (413) 545-8509; 5; (none); (none); (ningun)
3-BOX; 9654; Dave; M; Valderrama; 03/05/94; M; 58 Edmund Wynn Cir; (413) 545-8509; 5; (none); (none); (ningun)
3-BOX; 9654; Edwin; A; Hernandez; 03/05/94; M; 58 Edmund Wynn Cir; (413) 539-0132; 5; (none); (none); (ningun)
3-BOX; 9654; Edward; A; Hernandez; 03/05/93; M; 58 Shamrock St; (413) 539-0132; 5; (none); (none); (ningun); K
3-BOX; 9655; David; D; Vazquez; 03/05/93; M; 58 Shamrock St; (413) 581-2362; 5; (none); (none); (ningun); kent
3-BOX; 9655; Darren; D; Vazquez; 02/26/94; M; 62 Bay Meadow Rd; (413) 581-2362; 5; (none); (none); (ningun); K
3-BOX; 9656; David; A; Vasquez; 02/26/94; M; 62 Bay Meadow Rd; (413) 534-5045; 5; (none); (none); (ningun); wa
3-BOX; 9656; David; A; Vasquez; 02/25/94; M; 63 Federal St; (413) 534-5045; 5; (none); (none); (ningun); washin
3-BOX; 9656; Edwin; N; Trizarry; 02/25/94; F; 63 Federal St; (413) 545-9501; 5; (none); (none); (ningun); Gree
3-BOX; 9656; Edgardo; N; Trizarry; 02/24/94; F; 63 Greene St; (413) 545-9501; 5; (none); (none); (ningun); Gree
3-BOX; 9658; Edgardo; D; Lebron; 02/24/94; F; 63 Greene St; (413) 546-3536; 5; (none); (none); (ningun); van H
3-BOX; 9658; Donovan; D; Lebron; 02/24/94; F; 63 Lakeville Ave; (413) 546-3536; 5; (none); (none); (ningun); v
3-BOX; 9659; Darren; L; Wedderburn; 02/24/94; M; 63 Lakeville Ave; (413) 581-4211; 5; (none); (none); (ningun)
3-BOX; 9659; Daliana; L; Wedderburn; 02/20/94; M; 64 Federal St; (413) 581-4211; 5; (none); (none); (ningun);
3-BOX; 9661; Edgar; T; Markham-Lewis; 02/20/94; F; 64 Federal St; (413) 581-0934; 5; (none); (none); (ningun)
3-BOX; 9661; Donovan; T; Markham-Lewis; 02/15/94; F; 64 Lorenzo St; (413) 581-0934; 5; (none); (none); (ningun)
3-BOX; 9662; Edgar; D; Marquez; 02/15/94; M; 64 Lorenzo St; (413) 545-5621; 5; (none); (none); (ningun); van H
3-BOX; 9662; Destiny; D; Marquez; 02/15/93; M; 65 Cambridge St; (413) 545-5621; 5; (none); (none); (ningun); v
3-BOX; 9665; Destiny; N; Newton-Brookens; 02/15/93; F; 65 Cambridge St; (413) 532-9359; 5; (none); (none); (n
3-BOX; 9665; Deon; N; Newton-Brookens; 02/15/93; F; 66 Knollwood St; (413) 532-9359; 5; (none); (none); (ning
3-BOX; 9666; Destiny; S; Pagan; 02/15/93; F; 66 Knollwood St; (413) 534-4441; 5; (none); (none); (ningun); ken
3-BOX; 9666; Deon; S; Pagan; 02/11/94; F; 68 Jordan St; (413) 534-4441; 5; (none); (none); (ningun); kentucky; K
3-BOX; 9668; Destiny; K; Perez-Harley; 02/11/94; F; 68 Jordan St; (413) 581-5088; 5; (none); (none); (ningun)
3-BOX; 9668; Denzel; K; Perez-Harley; 02/10/93; F; 83 Catherine St; (413) 581-5088; 5; (none); (none); (ningun)
3-BOX; 9680; Dameian; L; Williams; 02/10/93; M; 83 Catherine St; (413) 531-5460; 5; (none); (none); (ningun); l
3-BOX; 9680; Daliana; L; Williams; 02/05/94; M; 835 State St; (413) 531-5460; 5; (none); (none); (ningun); ken
3-BOX; 9681; Cory; M; Willrudge; 02/05/94; M; 835 State St; (413) 534-2501; 5; (none); (none); (ningun); van H
3-BOX; 9682; Cory; C; Woodard; 02/05/94; M; 835 State St; (413) 545-6158; 5; (none); (none); (ningun); van Ho
3-BOX; 9682; Christopher; C; Woodard; 02/03/94; M; 84 Temple St; (413) 545-6158; 5; (none); (none); (ningun); va
3-BOX; 9694; Christopher; C; Gaynor; 02/03/94; M; 84 Temple St; (413) 535-1465; 5; (none); (none); (ningun); v
3-BOX; 9694; Christian; C; Gaynor; 02/03/93; M; 855 Beacon Cir; (413) 535-1465; 5; (none); (none); (ningun); v
3-BOX; 9696; Christopher; D; Kenny; 02/03/93; M; 855 Beacon Cir; (413) 534-4861; 5; (none); (none); (ningun); v
3-BOX; 9696; Chante; B; Kenny; 01/28/94; M; 86 School St; (413) 534-4861; 5; (none); (none); (ningun); oxford;
3-BOX; 9826; Amanda; L; Marin; 01/28/94; M; 86 School St; (413) 532-5668; 5; (none); (none); (ningun); van Ho
3-BOX; 9826; Alshia; L; Marin; 01/25/94; M; 89 Amore Rd; (413) 532-5668; 5; (none); (none); (ningun); van Ho
3-BOX; 9852; Alshia; M; Martin; 01/25/94; M; 89 Amore Rd; (413) 539-0889; 5; (none); (none); (ningun); van Ho
3-BOX; 9852; Alexandra; M; Martin; 01/23/93; M; 91 Oakwood Ter; (413) 539-0889; 5; (none); (none); (ningun); v
3-BOX; 9860; Alexis; C; Rummelle; 01/23/93; M; 91 Oakwood Ter; (413) 533-5514; 5; (none); (none); (ningun); wa
3-BOX; 9860; Alexandra; C; Rummelle; 01/04/94; M; 95 Pine St; (413) 533-5514; 5; (none); (none); (ningun); wasl
3-BOX; 9863; Alexis; L; Sanchez; 01/04/94; F; 95 Pine St; (413) 533-5481; 5; oxford; I want my child to atte
3-BOX; 9863; Aisha; L; Sanchez; 01/02/94; F; 95 Robert Dyer Cir; (413) 533-5481; 5; oxford; I want my child
3-BOX; 9901; Aisha; M; Johnson; 01/02/94; F; 95 Robert Dyer Cir; (413) 582-0038; 5; (none); (none); (ningun); J
3-BOX; 20433; Aaron; M; Willis; 01/02/94; F; 96 Kensington Ave; (413) 539-8029; 5; (none); (none); (ningun); ori
3-BOX; 20446; Aaron; A; Hoang; 01/02/94; F; 96 Kensington Ave; (413) 588-4528; 5; (none); (none); (ningun); gr
```

Ability to do n-up with variable data

This card must be signed and returned by April 22, 2008

1. Please verify or correct this information about your student:

Our information about your student Corrected information about student

SASID number	8262	_____
First name	Maribel	_____
Middle initial	A	_____
Last name	Flores	_____
Date of birth (mm/dd/yyyy)	07/08/93	_____
Gender (m/f)	F	_____
Residence Address	38 Lionel Benoit Rd	_____
Telephone number	(413) 739-0064	_____
Presently enrolled at	Oxford	_____
In grade	07	_____

2. Please choose a school for next year:

Under the new school zoning Plan, for your street address as shown at left, your child's Boundary School is **Kennedy Middle School**. Even if you are applying for a Magnet School, you **MUST** indicate your choice between your Boundary School and your Legacy School.

Please tell us whether you want your child to start attending **Kennedy** this September, or whether you wish to have your child remain at **Oxford** for the coming school year.

School names are variable based on info (eg. city, zip) found in the datastream

3. Be Sure to sign and date below:

Parent or Guardian signature _____ Date _____

This card must be signed and returned by April 22, 2008

1. Please verify or correct this information about your student:

Our information about your student Corrected information about student

SASID number	8266	_____
First name	Destiny	_____
Middle initial	C	_____
Last name	Davila	_____
Date of birth (mm/dd/yyyy)	06/24/93	_____
Gender (m/f)	F	_____
Residence Address	104 Tyler St	_____
Telephone number	(413) 734-9232	_____
Presently enrolled at	Oxford	_____
In grade	07	_____

The form is pre-populated with current database info, formatted appropriately and printed for the customer to verify

2. Please choose a school for next year:

Under the new school zoning Plan, for your street address as shown at left, your child's Boundary School is **Kiley Middle School**. Even if you are applying for a Magnet School, you **MUST** indicate your choice between your Boundary School and your Legacy School.

Please tell us whether you want your child to start attending **Kiley** this September, or whether you wish to have your child remain at **Oxford** for the coming school year.

3. Be Sure to sign and date below:

Parent or Guardian signature _____ Date _____

This card must be signed and returned by April 22, 2008

1. Please verify or correct this information about your student:

Our information about your student Corrected information about student

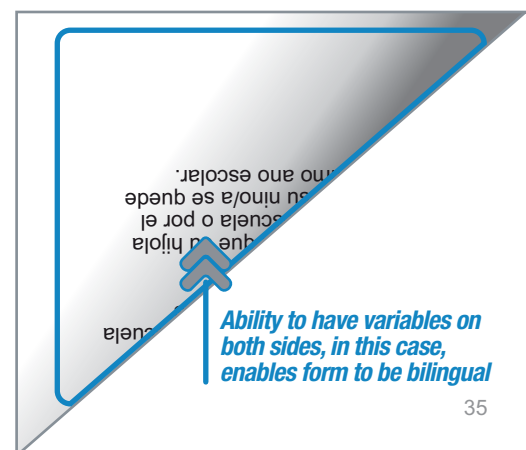
SASID number	8272	_____
First name	Jassandra	_____
Middle initial	J	_____
Last name	Negron	_____
Date of birth (mm/dd/yyyy)	03/07/93	_____
Gender (m/f)	F	_____
Residence Address	24 Maebeth St	_____
Telephone number	(413) 219-2127	_____
Presently enrolled at	(none)	_____
In grade	07	_____

2. Please choose a school for next year:

Under the new school zoning Plan, for your street address as shown at left, your child's Boundary School is **Kiley Middle School**. Even if you are applying for a Magnet School, you **MUST** indicate your choice between

3. Be Sure to sign and date below:

Parent or Guardian signature _____ Date _____



Ability to have variables on both sides, in this case, enables form to be bilingual

Esta Tarjeta debe ser firmada y devuelta para el 22 de abril del 2008

1. Favor de verificar y/o corregir la informacion de su hijo/a:

Informacion que tenemos de su estudiante Informacion corregida del estudiante:

Numero de identification 8262 _____
Nombre Maribel _____
Inicial A _____
Apellido Flores _____
Fecha de nacimiento 07/08/93 (mm/dd/yy) _____
Sexo (M/F) F _____
Direccion Residencial 38 Lionel Benoit Rd _____
Telefono (413) 739-0064 _____
Escuela a la que asiste Oxford _____
IGrado 07 _____

3. Asegurese de firmar abajo:

Firma del Padre o Encargado Fecha

2. Favor de escoger la escuela para el ano entrante:

Bajo el nuevo plan de zonas escolares; de acuerdo con la direccion que se muestra a la izquierda, la region escolar de su hijola es:

Aunque usted este solicitando una escuela Magnet debera. Indicar su opcion entr su region escolar y la escuela de lagado (escuela a la que asiste acualmente).

Favor de indicar si desea que su hijola comienze a sistir a la escuela o por el contrario quier que su nino/a se quede en para este proximo ano escolar.

Yo deseo que mi hijo/a Oxford
Yo deseo que mi hijo/a Kennedy

Esta Tarjeta debe ser firmada y devuelta para el 22 de abril del 2008

1. Favor de verificar y/o corregir la informacion de su hijo/a:

Informacion que tenemos de su estudiante Informacion corregida del estudiante:

Numero de identification 8266 _____
Nombre Destiny _____
Inicial C _____
Apellido Davila _____
Fecha de nacimiento 06/24/93 (mm/dd/yy) _____
Sexo (M/F) F _____
Direccion Residencial 104 Tyler St _____
Telefono (413) 734-9232 _____
Escuela a la que asiste Oxford _____
IGrado 07 _____

3. Asegurese de firmar abajo:

Firma del Padre o Encargado Fecha

2. Favor de escoger la escuela para el ano entrante:

Bajo el nuevo plan de zonas escolares; de acuerdo con la direccion que se muestra a la izquierda, la region escolar de su hijola es:

Aunque usted este solicitando una escuela Magnet debera. Indicar su opcion entr su region escolar y la escuela de lagado (escuela a la que asiste acualmente).

Favor de indicar si desea que su hijola comienze a sistir a la escuela o por el contrario quier que su nino/a se quede en para este proximo ano escolar.

Yo deseo que mi hijo/a Oxford
Yo deseo que mi hijo/a Kiley

Esta Tarjeta debe ser firmada y devuelta para el 22 de abril del 2008

1. Favor de verificar y/o corregir la informacion de su hijo/a:

Informacion que tenemos de su estudiante Informacion corregida del estudiante:

Numero de identification 8272 _____
Nombre Jassandra _____
Inicial J _____
Apellido Negron _____
Fecha de nacimiento 03/07/93 (mm/dd/yy) _____
Sexo (M/F) F _____
Direccion Residencial 24 Maebeth St _____
Telefono (413) 219-2127 _____
Escuela a la que asiste (none) _____
IGrado 07 _____

3. Asegurese de firmar abajo:

Firma del Padre o Encargado Fecha

2. Favor de escoger la escuela para el ano entrante:

Bajo el nuevo plan de zonas escolares; de acuerdo con la direccion que se muestra a la izquierda, la region escolar de su hijola es:

Aunque usted este solicitando una escuela Magnet debera. Indicar su opcion entr su region escolar y la escuela de lagado (escuela a la que asiste acualmente).

Favor de indicar si desea que su hijola comienze a sistir a la escuela o por el contrario quier que su nino/a se quede en para este proximo ano escolar.

(ningun)
Yo deseo que mi hijo/a Kiley

This card must be signed and returned by April 22, 2008

1. Please verify or correct this information about your student:

Our information about your student Corrected information about student

SASID number	8273	_____
First name	Jenisa	_____
Middle initial	L	_____
Last name	Navarro	_____
Date of birth (mm/dd/yyyy)	07/14/93	_____
Gender (m/f)	F	_____
Residence Address	72 West St	_____
Telephone number		_____
Presently enrolled at	(none)	_____
In grade	07	_____

2. Please choose a school for next year:

Under the new school zoning Plan, for your street address as shown at left, your child's Boundary School is **Chestnut Middle School**. Even if you are applying for a Magnet School, you **MUST** indicate your choice between your Boundary School and your Legacy School.

Please tell us whether you want your child to start attending **Chestnut** this September, or whether you wish to have your child remain at **(none)** for the coming school year.

3. Be Sure to sign and date below:

_____ Date _____

This card must be signed and returned by April 22, 2008

1. Please verify or correct this information about your student:

Our information about your student Corrected information about student

SASID number	8274	_____
First name	Christopher	_____
Middle initial	A	_____
Last name	Ortiz	_____
Date of birth (mm/dd/yyyy)	06/04/93	_____
Gender (m/f)	M	_____
Residence Address	89 Amore Rd	_____
Telephone number	(413) 736-7838	_____
Presently enrolled at	(none)	_____
In grade	07	_____

2. Please choose a school for next year:

Under the new school zoning Plan, for your street address as shown at left, your child's Boundary School is **Kennedy Middle School**. Even if you are applying for a Magnet School, you **MUST** indicate your choice between your Boundary School and your Legacy School.

Please tell us whether you want your child to start attending **Kennedy** this September, or whether you wish to have your child remain at **(none)** for the coming school year.

3. Be Sure to sign and date below:

_____ Date _____

This card must be signed and returned by April 22, 2008

1. Please verify or correct this information about your student:

Our information about your student Corrected information about student

SASID number	8277	_____
First name	Denzel	_____
Middle initial	S	_____
Last name	Pemberton	_____
Date of birth (mm/dd/yyyy)	02/17/93	_____
Gender (m/f)	M	_____
Residence Address	64 Federal St	_____
Telephone number	(413) 734-8611	_____
Presently enrolled at	Oxford	_____
In grade	07	_____

2. Please choose a school for next year:

Under the new school zoning Plan, for your street address as shown at left, your child's Boundary School is **Van Sickle Middle School**. Even if you are applying for a Magnet School, you **MUST** indicate your choice between your Boundary School and your Legacy School.

Please tell us whether you want your child to start attending **Van Sickle** this September, or whether you wish to have your child remain at **Oxford** for the coming school year.

3. Be Sure to sign and date below:

_____ Date _____

Esta Tarjeta debe ser firmada y devuelta para el 22 de abril del 2008

1. Favor de verificar y/o corregir la informacion de su hijo/a:

Informacion que tenemos de su estudiante / Informacion corregida del estudiante:

Numero de identification 8273 _____
Nombre Jenisa _____
Inicial L _____
Apellido Navarro _____
Fecha de nacimiento 07/14/93 (mm/dd/yy) _____
Sexo (M/F) F _____
Direccion Residencial 72 West St _____
Telefono _____
Escuela a la que asiste (none) _____
IGrado 07 _____

2. Favor de escoger la escuela para el ano entrante:

Bajo el nuevo plan de zonas escolares; de acuerdo con la direccion que se muestra a la izquierda, la region escolar de su hijola es:

Aunque usted este solicitando una escuela Magnet debera. Indicar su opcion entr su region escolar y la escuela de lagado (escuela a la que asiste acualmente).

Favor de indicar si desea que su hijola comienze a sistir a la escuela o por el contrario quierer que su nino/a se quede en para este proximo ano escolar.

(ningun)
Yo deseo que mi hijo/a Chestnut

3. Asegurese de firmar abajo:

Firma del Padre o Encargado Fecha

Esta Tarjeta debe ser firmada y devuelta para el 22 de abril del 2008

1. Favor de verificar y/o corregir la informacion de su hijo/a:

Informacion que tenemos de su estudiante / Informacion corregida del estudiante:

Numero de identification 8274 _____
Nombre Christopher _____
Inicial A _____
Apellido Ortiz _____
Fecha de nacimiento 06/04/93 (mm/dd/yy) _____
Sexo (M/F) M _____
Direccion Residencial 89 Amore Rd _____
Telefono (413) 736-7838 _____
Escuela a la que asiste (none) _____
IGrado 07 _____

2. Favor de escoger la escuela para el ano entrante:

Bajo el nuevo plan de zonas escolares; de acuerdo con la direccion que se muestra a la izquierda, la region escolar de su hijola es:

Aunque usted este solicitando una escuela Magnet debera. Indicar su opcion entr su region escolar y la escuela de lagado (escuela a la que asiste acualmente).

Favor de indicar si desea que su hijola comienze a sistir a la escuela o por el contrario quierer que su nino/a se quede en para este proximo ano escolar.

(ningun)
Yo deseo que mi hijo/a Kennedy

3. Asegurese de firmar abajo:

Firma del Padre o Encargado Fecha

Esta Tarjeta debe ser firmada y devuelta para el 22 de abril del 2008

1. Favor de verificar y/o corregir la informacion de su hijo/a:

Informacion que tenemos de su estudiante / Informacion corregida del estudiante:

Numero de identification 8277 _____
Nombre Denzel _____
Inicial S _____
Apellido Pemberton _____
Fecha de nacimiento 02/17/93 (mm/dd/yy) _____
Sexo (M/F) M _____
Direccion Residencial 64 Federal St _____
Telefono (413) 734-8611 _____
Escuela a la que asiste Oxford _____
IGrado 07 _____

2. Favor de escoger la escuela para el ano entrante:

Bajo el nuevo plan de zonas escolares; de acuerdo con la direccion que se muestra a la izquierda, la region escolar de su hijola es:

Aunque usted este solicitando una escuela Magnet debera. Indicar su opcion entr su region escolar y la escuela de lagado (escuela a la que asiste acualmente).

Favor de indicar si desea que su hijola comienze a sistir a la escuela o por el contrario quierer que su nino/a se quede en para este proximo ano escolar.

Yo deseo que mi hijo/a Oxford
Yo deseo que mi hijo/a Van Sickle

3. Asegurese de firmar abajo:

Firma del Padre o Encargado Fecha



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