

Quick & Confidential, Inc.
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Firm: _____
Name: _____
Telephone No.: _____
Client or Matter No. _____

Job # (for Q&C use only): _____
Order Date: _____
Date Due: _____
Time Due: _____

Scanning (Standard dpi 300):

☐ Other dpi: _____

Do we Scan?:

Yes No

- | | | |
|--------------------------|--------------------------|------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Covers |
| <input type="checkbox"/> | <input type="checkbox"/> | Spines |
| <input type="checkbox"/> | <input type="checkbox"/> | File Folders |
| <input type="checkbox"/> | <input type="checkbox"/> | Redwells |
| <input type="checkbox"/> | <input type="checkbox"/> | Tabs |
| <input type="checkbox"/> | <input type="checkbox"/> | Duplicates/Carbon Copy |
| <input type="checkbox"/> | <input type="checkbox"/> | Standard Language |
| <input type="checkbox"/> | <input type="checkbox"/> | Blank Slip Sheets |
| <input type="checkbox"/> | <input type="checkbox"/> | Receipts: Multiple to a page |
| <input type="checkbox"/> | <input type="checkbox"/> | Other _____ |

Post-It Notes:

- | | | |
|--------------------------|--------------------------|----------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Post-its |
| <input type="checkbox"/> | <input type="checkbox"/> | Scan one with/ one without |
| <input type="checkbox"/> | <input type="checkbox"/> | Remove and Replace |

Oversized (Larger then 11x17):

- | | | |
|--------------------------|--------------------------|-----------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Size for Size |
| <input type="checkbox"/> | <input type="checkbox"/> | Reduce to 11x17 |
| <input type="checkbox"/> | <input type="checkbox"/> | Other _____ |

Image Format:

- | | |
|--------------------------|--------------------|
| <input type="checkbox"/> | PDF (single page) |
| <input type="checkbox"/> | PDF (multi-page) |
| <input type="checkbox"/> | Tiff (single page) |
| <input type="checkbox"/> | Tiff (multi-page) |

Color:

- | | |
|--------------------------|-----------------------------------|
| <input type="checkbox"/> | All in Black & White |
| <input type="checkbox"/> | All Color (including Logos) |
| <input type="checkbox"/> | Color Photos (one to a page) |
| <input type="checkbox"/> | Color Photos (multiple to a page) |

☐ Graphs

☐ Charts

☐ Highlighting

☐ Other: _____

Scan per:

Folder Subfolder Pdf

- | | | | |
|--------------------------|--------------------------|--------------------------|----------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Box |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Folder/ Binder |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Document |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Clipped/Tagged |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Rubberbanded |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Other: _____ |

File Naming:

- | | |
|--------------------------|-------------------------------|
| <input type="checkbox"/> | Generic File Name (01, 02...) |
| <input type="checkbox"/> | Same as Bates Number |
| <input type="checkbox"/> | Same as File Folders/Binders |
| <input type="checkbox"/> | Same as original |
| <input type="checkbox"/> | Other: _____ |

Bates:

- | | | |
|--------------------------|-------------------|------------------------------------|
| <input type="checkbox"/> | Hand Bates | |
| <input type="checkbox"/> | Electronic Bates | |
| <input type="checkbox"/> | Prefix: _____ | <input type="checkbox"/> No Prefix |
| <input type="checkbox"/> | Space | <input type="checkbox"/> No Space |
| <input type="checkbox"/> | Suffix | |
| <input type="checkbox"/> | Other: _____ | |
| <input type="checkbox"/> | Default Font/Size | (Arial/ 11pt.) |
| <input type="checkbox"/> | Other: _____ | |

OCR (Standard-Text Output):

- | | | |
|--------------------------|----------------|------------------------------|
| <input type="checkbox"/> | Searchable PDF | |
| <input type="checkbox"/> | Word | <input type="checkbox"/> Doc |
| Other: _____ | | |

Export:

- | | | |
|--------------------------|----------------|--------------------------------------|
| <input type="checkbox"/> | Summation | <input type="checkbox"/> Concordance |
| <input type="checkbox"/> | Trial Director | <input type="checkbox"/> Case Law |
| <input type="checkbox"/> | IPRO | <input type="checkbox"/> Sanction |
| <input type="checkbox"/> | Relativity | <input type="checkbox"/> Ring Tail |

Blowbacks:

- | | | | |
|--------------------------|--|---|-------------------------------|
| <input type="checkbox"/> | Number of sets: _____ | | |
| <input type="checkbox"/> | With Slip Sheets between files/folders | | |
| <input type="checkbox"/> | Staples/Clips | | |
| <input type="checkbox"/> | Match Original Binding Elements | | |
| <input type="checkbox"/> | 3-hole drill | | |
| <input type="checkbox"/> | 2-hole drill | <input type="checkbox"/> Top | <input type="checkbox"/> Side |
| <input type="checkbox"/> | Black & White | <input type="checkbox"/> All in Black & White | |
| <input type="checkbox"/> | Color Photos | <input type="checkbox"/> All in Color | |
| <input type="checkbox"/> | Graphs | | |
| <input type="checkbox"/> | Highlighting | | |
| <input type="checkbox"/> | Charts | | |
| <input type="checkbox"/> | Other: _____ | | |

Media Output:

- | |
|---|
| Number of CD's: _____ |
| Number of DVD's: _____ |
| Specified Title/ Disc Label: |
| <input type="checkbox"/> Client Matter Number |
| <input type="checkbox"/> Bates Range |
| <input type="checkbox"/> Other |

Special Instructions:
