

Our Graphics Department has prepared this proof to help you visualize copy placement and color separation of your label. Please review the design concept as well as the ink colors carefully. Your signature of approval gives us permission to proceed with your order. If any corrections are required, please make them on this sheet. Please return this proof promptly via mail or fax. Orders will not proceed without written approval by the customer.

- NOT FOR EXACT COLOR MATCH FOR PLACEMENT ONLY -

RED DAYGLO

BILLED AS CHOICE SELL AS CHOICE

LABEL SHOWN ACTUAL SIZE

If any correct	CUSTOMER SIGN-OFF tions are required, please make there	
Approved by:		Date
Thank you,		
4 Thomp East Win	CIALTY PRINTING LLC Label Manufacturers oson Road odsor, CT 06066 fice: (860) 623-8870 Fax: (860) 623-8861	
	SPECIALTY SIGN-OFF	
Approved by:	<u> </u>	
7	Production Coordinator Signature	Date
Approved by:		
	Art Dent Signature	Date

LABEL INFORMATION				
Designed by: Dan Silva		Date:6-13-08		
Customer: <i>Hannaford</i>				
Job ID: <i>HAN22</i>	25	Rev:		
Label Size: 3	. 0 "W x	2.0 "H CR:125		
Fonts: NA				
■ Spot Colors: □ Four Color Process:				
PMS: Black	PMS:	PMS:		
PMS:	PMS:	PMS:		
PMS:	PMS:	PMS:		
PMS:	PMS:	PMS:		
LABEL SLIVES STATES TO SERVICE TO				