

# ORDER FORM / QUOTE FORM

2407-106th St. S.W.  
Everett, WA 98204  
www.labelsplus.com



Business Solutions With You In Mind!

800-275-7587 Toll Free  
206-523-1973 Fax  
206-523-0477

CUSTOMER NAME		DATE ORDERED	<input type="checkbox"/> NEW <input type="checkbox"/> EXACT REPEAT <input type="checkbox"/> REPEAT WITH CHANGE	
STREET ADDRESS		DATE REQUIRED	CUSTOMER P.O.#	FAX #
CITY, STATE, ZIP		<input type="checkbox"/> HOT <input type="checkbox"/> NO HURRY	CUSTOMER CONTACT/REP.	
			PHONE NUMBER	

### SPECIFICATIONS





<b>SIZE OF LABEL:</b> <input type="checkbox"/> RECTANGLE <input type="checkbox"/> CIRCLE <input type="checkbox"/> OVAL	<b>CUT:</b> <input type="checkbox"/> KNIFE <input type="checkbox"/> DIE <input type="checkbox"/> SHEETED <input type="checkbox"/> "0" CLEARANCE <input type="checkbox"/> _____	<b>PRINT:</b> <input type="checkbox"/> POSITIVE <input type="checkbox"/> REVERSE <input type="checkbox"/> FLOOD <input type="checkbox"/> MIRROR <input type="checkbox"/> _____	<b>ADHESIVE:</b> <input type="checkbox"/> PERMANENT <input type="checkbox"/> REMOVABLE <input type="checkbox"/> COLD STOR. <input type="checkbox"/> 717 <input type="checkbox"/> _____	<b>STOCK:</b> <input type="checkbox"/> GLOSS <input type="checkbox"/> MATTE LITHO <input type="checkbox"/> UNCOATED LITHO <input type="checkbox"/> FLUORESCENT <input type="checkbox"/> VINYL <input type="checkbox"/> SG <input type="checkbox"/> _____	<b>INK COLORS:</b>
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### LABEL USAGE

<b>SPECIAL INST:</b> <input type="checkbox"/> PERFORATED <input type="checkbox"/> LAMINATED <input type="checkbox"/> PIN FEED <input type="checkbox"/> SWPP <input type="checkbox"/> TAB <input type="checkbox"/> 1/2 MIL UVPP <input type="checkbox"/> SCORED: <input type="checkbox"/> PCS <input type="checkbox"/> UV <input type="checkbox"/> MATTE ACETATE	<b>SURFACE USED ON:</b> <input type="checkbox"/> BOXES <input type="checkbox"/> PLASTIC <input type="checkbox"/> GLASS <input type="checkbox"/> POLY BAGS <input type="checkbox"/> METAL <input type="checkbox"/> _____	<b>USED:</b> <input type="checkbox"/> INSIDE <input type="checkbox"/> OUTSIDE  <b>DISPENSED:</b> <input type="checkbox"/> HAND <input type="checkbox"/> AUTOMATIC	<b>CORE SIZE:</b> <input type="checkbox"/> 3" <input type="checkbox"/> 1" <input type="checkbox"/> CORELESS <input type="checkbox"/> FANFOLD	<b>LABELS / ROLL:</b> # UP _____ MAX. DIAM. _____ COUNT _____ TOTALIZING COUNT: _____	<b>PROOF:</b> <input type="checkbox"/> B & W <input type="checkbox"/> COLOR  <b>SEND TO</b> _____ _____
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### RE-WIND

PLEASE CHECK APPROPRIATE BOX

1   2   3   4 

5   6   7   8 

### SHIPPING INSTRUCTIONS

SHIP TO

STREET ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

ATTENTION \_\_\_\_\_ BILL TO  YES  NO CUSTOMER P.O.# \_\_\_\_\_

SHIP VIA  UPS GRD.  UPS BLUE (2nd day)  UPS RED (next day)  WILL CALL \_\_\_\_\_

### SKETCH / SAMPLE