



ORDER FORM

ONDER FORIAL					
Contact Name: Dat Company Name: Ord		Date: Order No:			
					Delivery Address:
Fax:					
	Email:				
CUSTOM PRINTED OR BLANK	LABELS				
Description:		New	or Repe	at Job?	
Quantity:					
Size (mm): Must be exact size / Size can be changed slightly		New Job Ouote No			
Shape: Square / Rectangle / Circle / Oval / Triangle /	/ Special	(If known)			
Number of colours: PMS or CMYK number/s:		Repeat Job No change / With changes			
Number of variants:			(please circle)		
Packaging: Quantity per Roll / Dispenser /	Sheet / FanFold	Profile nu	ımber:		
Core Size (mm): 25 / 38 / 76 / Other		(ii kriowri)			
Stock finish: Gloss / Matt / Fluoro Red / F Yellow / F Orange	/ F Pink / F Green	Previous (If known)	order no:		
Stock: Paper / Synthetic / Clear / Other		(ii kriowri)			
Adhesive: Permanent / Removable / Freezer / Unadhesed					
Roll details: (if relevant, please circle)	1			T	
Torone Stocky Stocky	5 6	apiena	7	8	
Labels wound on the OUTSIDE of roll	Labels v	wound on th	ound on the INSIDE of roll		
STOCK ITEM					
Code Description		it	Quantity		

Please send me a copy of the Sticky Business Catalogue