

LABEL QUOTATION REQUEST FORM


Customer:	_____		
Address:	_____		

Tel No:	_____	E Mail:	_____
Fax:	_____	Contact:	_____

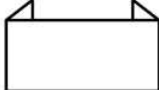
Please Tick as Appropriate

<p>PRINTED: <input type="checkbox"/></p> <p>Poly Satin: <input type="checkbox"/></p> <p>Cotton: <input type="checkbox"/></p> <p>Self Adhesive: <input type="checkbox"/></p> <p>Size: (mm) _____</p> <p>Quantity Required: _____</p> <p>Background Colour: _____</p> <p>Text / Logo Colour: _____</p>	<p>WOVEN: <input type="checkbox"/></p> <p>Satin: <input type="checkbox"/></p> <p>Taffeta: <input type="checkbox"/></p> <p>Self Adhesive: <input type="checkbox"/></p>	<p>SWING TICKET: <input type="checkbox"/></p> <p>With Punched Hole: <input type="checkbox"/></p> <p>With Punched Hole & String: <input type="checkbox"/></p> <p>Size: (mm) _____</p> <p>Front: Background Colour: _____</p> <p>Front: Text / Logo Colour: _____</p> <p>Reverse: Background Colour: _____</p> <p>Reverse: Text / Logo Colour: _____</p>
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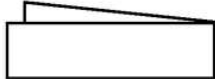
Cut & Heat Sealed:




Cut & End Fold:




Cut & Loop Landscape:



Cut & Loop Portrait:



Reels



Please Attach Artwork Below:



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