

ORDER DATE: _____

NUMBER: _____

Mu Mu Color Graphics

1624 Vestal Road Vestal, NY 13850-1826
Phone: 607-786-5938 * FAX: 866-412-3822
Web: mumucolorgraphics.com

LABEL ORDER FORM

NAME: _____

COMPANY: _____

SHIPPING _____

ADDRESS: _____

CITY: _____

STATE: _____ ZIP: _____

Internal Use Only

QUANTITY	DESCRIPTION	UNIT COST	UP CHARGES	TOTAL
Detailed description of job:				
Please include full payment with order				
* If tax exempt, please supply signed Resale Certificate with exemption number. ____ Certificate Enclosed. Exemption # _____	Shipping Charge			
	SUB TOTAL			
	* Sales Tax			
	GRAND TOTAL			
	Payment in Full			

Size / Stock # _____

Quantity

x

Unit Price
\$ _____

=

Extended Price
\$ _____

Quantity _____

Label Stock

Color _____

Stock Finish _____

Ink Color _____ / _____ / _____

Consecutive Numbering (pages 35-37)

3/16" high (4 or 5 digits)

1/8" high (5 or 6 digits)

Artwork

(We print within 1/8" margin or bleed charge applies)

Artwork enclosed Screen (no charge)

Reduce (no charge) Enlarge (no charge)

If your artwork is not sharp and clean should we:

Print as-is? Phone you for better artwork

Perform minor cleanup and enhancement at no charge if needed?
(If difficult cleanup required, we will call and advise pricing)

Upcharges (add if applicable, see p. 62 for details) ▼

Art reduce, enlarge or cleanup	No Charge	
Bleed	\$30 each	
Color match	\$42 each	
Copy Changes	\$18 each	
Ink Changes	\$18 each	
Screen	No Charge	
Each Additional Ink Color	\$50 each	
Paper Change	\$18 each	
Other		

All Copy is centered on the label and will be spaced **exactly** as shown, unless plainly specified otherwise. Please type/print clearly or attach a separate sheet.

Uppercase
Upper & Lowercase
All Lowercase

Typestyle or Instructions

Label Layout

Copy position on Label

Flush Right

Flush Left

Centered

Type Position on Label

Center Copy

Flush Left

Flush Right

Justify

Border Information

No Border

1/8" from edge

Print border to bleed