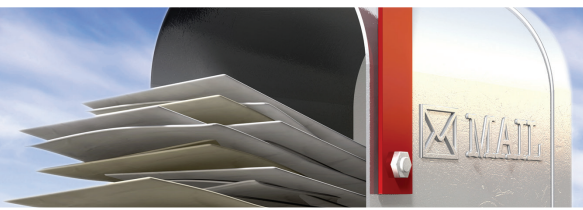


Envelopes Order Form



QUOTATION NEW ORDER CHANGE REPEAT EXACT REPEAT _____

Date: _____ Dealer Name: _____

Customer Name: _____ Ship to: Dealer Customer

CUSTOMER INFO

Name: _____ Ph: _____ Contact _____

Address: _____ City: _____ Prov _____ PC _____

ORDER INFO

Envelope Size: _____ Quantity: _____ Stock: White Kraft

Flap Position: Open side Open end

Type: Plain Artline Plain Window Artline Window Peel & Seal

Face Ink Colour(s): _____ Same Ink Colour(s) on Back Flap: Yes No

Off The Shelf Twindows: TW20 Qty _____ TW30 Qty _____

TW40 Qty _____ TW50 Qty _____

SPECIAL INSTRUCTIONS

ORDER DETAILS

Art Required: No Yes Art supplied via: Email Hard Copy

Proof Required: No Yes:

Proof Type: Email _____ Fax _____

Hard Copy

**CONFIRM YOUR GRAPHICS WITH CANADA POST STANDARDS
COMMERCIAL SERVICE NETWORK: 1-800-260-7678 WWW.CANADAPOST.CA**