



Bindery Services

1545 Britannia Rd. E. Unit 2  
Mississauga, ON L4W 3C6

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TAB ORDER

TAB QUOTE

ATTN: \_\_\_\_\_

DATE: \_\_\_\_\_

COMPANY \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

QUANTITY	_____	Sets	_____	tabs per set	_____
BANKS	_____	tabs per bank	_____	banks	_____
SIZE OF TAB	_____	extension 1/2"	_____		
SHEET SIZE	_____	binding edge	_____	over all size	_____
PAPER	_____	grade	_____	colour	_____
COLOUR OF INK	_____	weight	_____		
TAB PRINTING	Black <input type="checkbox"/>	Other	_____		
BODY PRINTING	print 1 side <input type="checkbox"/>	print 2 sides <input type="checkbox"/>			
MYLAR ON TAB	print 1 side <input type="checkbox"/>	print 2 sides <input type="checkbox"/>			
PROOFS REQUIRED	Clear <input type="checkbox"/>	Other	_____		
REINFORCED HOLES	Yes <input type="checkbox"/>	No <input type="checkbox"/>			
COLLATED	Yes <input type="checkbox"/>	No <input type="checkbox"/>			
DRILLED	Yes <input type="checkbox"/>	No <input type="checkbox"/>	# Holes	_____	Diam. _____ Centers _____
PACKAGE	BULK <input type="checkbox"/>	Paper Banded <input type="checkbox"/>	Poly Bag	<input type="checkbox"/>	

**PRICE**

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
STYLE "A"	STYLE "B"	STYLE "C"	STYLE "D"