

# Business Form Quote Sheet



P. O. Box 701  
20200 Algreg Street  
Pflugerville, TX 78691-0701  
Phone: 512-251-2800  
Fax: 512-251-3451

Date: \_\_\_\_\_

Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City - State - ZIP: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

Job Number: \_\_\_\_\_  New Order  Exact Repeat  Repeat w/ Change

Quote Quantity: \_\_\_\_\_ M \_\_\_\_\_ M \_\_\_\_\_ M

Combination:  No  Yes How Many Lots?: \_\_\_\_\_

Continuous Check  Continuous Form  Unit Set  
 Cut Sheet  Laser Checks  Fan-A-Part

Size: \_\_\_\_\_ Width x \_\_\_\_\_ Length

Composition:  Negatives Furnished  Camera Ready  Needs to be Set

Number of Parts: \_\_\_\_\_ Number of Ink Colors: \_\_\_\_\_

	Paper Weight		Paper Color		Ink Colors		Margin Words
1.		1.		1.		1.	
2.		2.		2.		2.	
3.		3.		3.		3.	
4.		4.		4.		4.	
5.		5.		5.		5.	
6.		6.		6.		6.	

Horizontal Perfs:  Yes  No How many: \_\_\_\_\_  
Vertical Perfs:  Yes  No How many: \_\_\_\_\_  
Part to Part Changes:  Yes  No How many: \_\_\_\_\_  
Blockouts:  Yes  No How many: \_\_\_\_\_

Numbering Arabic:  Yes  No How many: \_\_\_\_\_  
MICR:  Yes  No How many: \_\_\_\_\_

Punching:  Yes  No Qty: \_\_\_\_\_ Location: \_\_\_\_\_

Bindery:  Shrink Wrapping \_\_\_\_\_ / Per Package  
 Wrap-around Covers \_\_\_\_\_ / Per Book  
 Padding \_\_\_\_\_ / Per Pad

Additional Information: \_\_\_\_\_  
\_\_\_\_\_

Please contact us at 1-800-633-2144 or fax a copy of this form to 1-512-251-3451 so that we can give you a quote.