

SALES ORDER ENTRY

☐ New Job ☐ Repeat Order

SALES	DATE ENTERED	PO NUMBER	QUOTE NUMBER	DUE DATE
SOLD TO:			SHIP TO:	
Tel:			Fax:	
Att:			☐ Call in advance to schedule delivery	

CT #	Customer Item #	Item Description	Last 5 Digit of UPC	Board Information	Order Quantity	Price/M
PRINTING		COATING		DIECUTTING		WINDOW
☐ YES ☐ NO		☐ YES ☐ NO		☐ YES ☐ NO		☐ YES ☐ NO
☐ 4 PROCESS ☐ PMS ☐ CONVENTIONAL ☐ UV INKS		☐ W/B COATING ☐ MATTE COATING ☐ GLOSS UV ☐ MATTE UV ☐ SOFT TOUCH		☐ EMBOSS REGISTERED BLIND ☐ FOIL STAMPING		☐ MACHINE GLUING ☐ HAND GLUING
				Window Size		
				Film Size		
PMS NO.	Front Side Colors	Extra Cost Report			Packing Specification	
		☐ YES ☐ NO				
		ITEM	QTY	COST	Boxes/case	
					Cases/Pallet	
					Case Size	
	Back Side Colors				Shipping Instruction	
Prepared By:		Date:			Planner 's Approval:	
					Date:	