

TST Printing Carbonless Book Job Order

TST Printing Pty Ltd
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1E Parsons Ave SPRINGVALE VIC 3171

Company: _____ Date: _____ / _____ / 20

Address: _____

Suburb: _____ State: _____ Postcode: _____

Contact Name: _____ Phone: _____ Fax: _____

E-mail: _____ ☐ (Please tick if delivery address same as above or fill in the different address below)

Delivery to: _____

Suburb: _____ State: _____ Postcode: _____

Job name: _____ Your Job Order/
Quotation No: _____

Size Code: ☐A4 ☐A5 ☐A6 ☐DL ☐A3 Book Size (include 17mm perf): _____ mm

Quantity (Book): _____ Sets/Book: _____ ☐No Numbering ☐Numbering Start: _____

Copy/Set: ☐Single ☐Duplicate ☐Triplicate ☐Quadruplicate ☐Quintuplicate

☐ Binding

Front Cover: ☐ Crocodile ☐ Blue ☐ Red ☐ Grey ☐ Green
☐ Soft Cover ☐ White ☐ Buff ☐ Blue

Back Cover: ☐ Boxboard ☐ Crocodile (*Extra Charge same colour as front)

Tape Colour: ☐ Blue ☐ Red ☐ Black ☐ Green ☐ Other _____

Writing Plate: ☐ Wraparound (Bind on book) _____ ☐ Loose (Insert with book) _____


☐ Glue

Side: ☐ Long Edge ☐ Short Edge Soft Cover: ☐ White ☐ Buff

Writing Plate: ☐ Wraparound (Bind on book) _____ ☐ Loose (Insert with book) _____

☐ Fan Apart Glue (Sets): _____ Side: ☐ Left ☐ Right ☐ Top ☐ Bottom ☐ Corner: _____

☐ Holes drilling Side: ☐ Long Edge ☐ Short Edge how many hole(s)? ☐ 1 ☐ 2 ☐ 3 ☐ 4

Paper Type	1st Copy	2nd Copy	3rd Copy	4th Copy	Other
Carbonless Paper Colour (60GSM)	<input type="checkbox"/> White <input type="checkbox"/> Yellow <input type="checkbox"/> Blue <input type="checkbox"/> Green <input type="checkbox"/> Pink	<input type="checkbox"/> Blue <input type="checkbox"/> Yellow <input type="checkbox"/> Pink <input type="checkbox"/> Green <input type="checkbox"/> White	<input type="checkbox"/> Blue <input type="checkbox"/> Yellow <input type="checkbox"/> Pink <input type="checkbox"/> Green <input type="checkbox"/> White	<input type="checkbox"/> Blue <input type="checkbox"/> Yellow <input type="checkbox"/> Pink <input type="checkbox"/> Green <input type="checkbox"/> White	
Front Ink Colour	<input type="checkbox"/> Black <input type="checkbox"/> R-Blue <input type="checkbox"/> CMYK <input type="checkbox"/> _____ PMS	<input type="checkbox"/> Black <input type="checkbox"/> R-Blue <input type="checkbox"/> CMYK <input type="checkbox"/> _____ PMS	<input type="checkbox"/> Black <input type="checkbox"/> R-Blue <input type="checkbox"/> CMYK <input type="checkbox"/> _____ PMS	<input type="checkbox"/> Black <input type="checkbox"/> R-Blue <input type="checkbox"/> CMYK <input type="checkbox"/> _____ PMS	
Back Ink Colour	<input type="checkbox"/> No Print <input type="checkbox"/> Black <input type="checkbox"/> _____ PMS	<input type="checkbox"/> No Print <input type="checkbox"/> Black <input type="checkbox"/> _____ PMS	<input type="checkbox"/> No Print <input type="checkbox"/> Black <input type="checkbox"/> _____ PMS	<input type="checkbox"/> No Print <input type="checkbox"/> Black <input type="checkbox"/> _____ PMS	
Perforation 	<input type="checkbox"/> Long edge <input type="checkbox"/> Short edge <input type="checkbox"/> Fast	<input type="checkbox"/> Long edge <input type="checkbox"/> Short edge <input type="checkbox"/> Fast	<input type="checkbox"/> Long edge <input type="checkbox"/> Short edge <input type="checkbox"/> Fast	<input type="checkbox"/> Long edge <input type="checkbox"/> Short edge <input type="checkbox"/> Fast	

Note:

*Please sign here if you agree for approval.

Date: _____ / _____ / 20

Name: _____

(TST Printing Staff Only)
QUOTE PRICE

PRICE \$.

DELIVERY FEE \$.

TOTAL INC GST \$.