

# INDEX TABS .BIZ

VOICE (800) 322-4747  
F A X (888) 329-6694

Q U O T A T I O N

PHONE ( ) FAX ( )

CUSTOMER NAME \_\_\_\_\_ PO # \_\_\_\_\_

ADDRESS \_\_\_\_\_

CUSTOMER CONTACT \_\_\_\_\_

QUOTED BY \_\_\_\_\_ DATE QUOTED \_\_\_\_/\_\_\_\_/\_\_\_\_

## TAB SPECIFICATIONS

QUANTITY	SETS _____	TABS PER SET _____
CUT	CUT (TABS PER BANK) _____	
TAB	<input type="checkbox"/> PLAIN    MYLAR: CLEAR <input type="checkbox"/> COLOR (S) <input type="checkbox"/> _____	
PAPER	<input type="checkbox"/> IP-90 WHITE <input type="checkbox"/> IP-100 WHITE <input type="checkbox"/> IP-125 WHITE <input type="checkbox"/> CUSTOMER SUPPLIED OTHER _____ Must be trimmed to size	
SHEET SIZE	Standard Side Tab	Standard Bottom Tab
	OVERALL SIZE <input type="checkbox"/> 9" x 11"	<input type="checkbox"/> 8½" x 11½"
EXTENSION	OVERALL SIZE _____" x _____"	Non-Standard Tab
	BODY SIZE <input type="checkbox"/> 8½" x 11"	OVERALL SIZE _____" x _____"
MYLAR BINDING EDGE	<input type="checkbox"/> YES-Long Edge <input type="checkbox"/> YES-Short Edge <input type="checkbox"/> NO	
COLLATING	<input type="checkbox"/> YES <input type="checkbox"/> NO	
DRILLING	<input type="checkbox"/> YES <input type="checkbox"/> 3 HOLES - 4¼" C to C <input type="checkbox"/> 5/16" Standard <input type="checkbox"/> ¼" <input type="checkbox"/> 3/8" <input type="checkbox"/> NO <input type="checkbox"/> OTHER: # HOLES _____ <input type="checkbox"/> MATCH SAMPLE CENTERS _____	
PRINTING	TABS    BODY COPY — <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> ONE SIDE <input type="checkbox"/> ONE SIDE <input type="checkbox"/> COMMON <input type="checkbox"/> REVERSED TAB COPY <input type="checkbox"/> TWO SIDES <input type="checkbox"/> TWO SIDES <input type="checkbox"/> DIFFERENT <input type="checkbox"/> BLEEDS <input type="checkbox"/> FILM OUTPUT _____ PGS.	OTHER CONSIDERATIONS
INK COLOR	<input type="checkbox"/> BLACK <input type="checkbox"/> PMS - _____	
SHRINKWRAPPING	<input type="checkbox"/> SHRINKWRAP IN _____'s <input type="checkbox"/> CHIPBOARD (30 tabs or less)	
PACKAGING	<input type="checkbox"/> CARTON <input type="checkbox"/> SKID	
SHIPPING	<input type="checkbox"/> GROUND <input type="checkbox"/> 3 DAY <input type="checkbox"/> 2 DAY <input type="checkbox"/> NEXY DAY	

For  
IndexTabs.Biz  
Use Only

**QUANTITY (1)**  
\_\_\_\_\_  SETS  TABS  
OF \_\_\_\_\_ TAB(S)/SET  
@  
\$ \_\_\_\_\_ per  SET  TAB  
\$ \_\_\_\_\_ shipping

**QUANTITY (2)**  
\_\_\_\_\_  SETS  TABS  
OF \_\_\_\_\_ TAB(S)/SET  
@  
\$ \_\_\_\_\_ per  SET  TAB  
\$ \_\_\_\_\_ shipping

**QUANTITY (3)**  
\_\_\_\_\_  SETS  TABS  
OF \_\_\_\_\_ TAB(S)/SET  
@  
\$ \_\_\_\_\_ per  SET  TAB  
\$ \_\_\_\_\_ shipping

**QUANTITY (4)**  
\_\_\_\_\_  SETS  TABS  
OF \_\_\_\_\_ TAB(S)/SET  
@  
\$ \_\_\_\_\_ per  SET  TAB  
\$ \_\_\_\_\_ shipping

### RUSH POLICY

4 working days add 10%\*  
3 working days add 25%\*  
2 working days add 50%\*  
24 hours, add 100%\*  
\*Subject to production approval

Working days are based from time of proof approval; if proof is returned before 12 noon, the current day counts as a working day; if the proof is returned after 12 noon the current day is not considered to be available for production purposes and will not count as a working day. Body copy can not be rushed.

### OVERS POLICY

We reserve the right to overship no more than 10% and bill accordingly. For exact quantities add 10% to quoted prices.