



FORMS PRINTING SPECIFICATIONS

Requisition No.	Record No
Date prepared	

GENERAL DESCRIPTION

Title

International Operations File Folders

Form No. SC ISP-5001	Dated 2017-06-21	Stock Number	U I	Quantity			
<input type="checkbox"/> Flat	<input type="checkbox"/> Set	<input type="checkbox"/> Continuous	<input type="checkbox"/> Tab card	<input type="checkbox"/> Tag	<input type="checkbox"/> Label	<input type="checkbox"/> Sales book	Other

MATERIAL - (Paper, card stock, carbon etc.)

Dimensions Trim size	Wide X	High	Stub size	Tear out	Wide X	High
PAPER (State grade, type, colour, basis weight and reference to applicable CGSB standard.)			Ink: black			
Panels: 2 Stock: 220M Index Bristol, Manilla Flat size: 19" wide x 14 3/4" high Score for expansion: 1/2"-starts at 9 1/4" Corners: square Fasteners: 2 heat seal fasteners - 2 1/2" capacity (top center on inside panels)						

Carbons	Recessed	Protruding
<input type="checkbox"/> Black <input type="checkbox"/> Blue Other	Inches	Inches
Narrow	Uncarbonized	Write test requested?
<input type="checkbox"/> Right <input type="checkbox"/> Left Inches	<input type="checkbox"/> Right <input type="checkbox"/> Left <input type="checkbox"/> Top <input type="checkbox"/> Bottom	<input type="checkbox"/> Yes <input type="checkbox"/> No

PRINTING - (As specified in the attached copy)

<input type="checkbox"/> One side	<input type="checkbox"/> Head to head	<input type="checkbox"/> Tumble	<input type="checkbox"/> Head to side	Ink colour	Proofs requested (No. & type)
				Black	1 proof
Serial numbers	From	To	Ink colour		<input type="checkbox"/> Crash <input type="checkbox"/> Individual parts

Size of margins	Front:	Top	Left	Back:	Top	Left
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CONSTRUCTION

Perforate

Collate/Gather

Punching	Top	Bottom	Right	Left	No. of holes	Diameter	C-C	<input type="checkbox"/> Round	Other				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>					
Binding	<input type="checkbox"/> Wire	<input type="checkbox"/> Sew	<input type="checkbox"/> Side	<input type="checkbox"/> Score	<input type="checkbox"/> Saddle	<input type="checkbox"/> Fold	<input type="checkbox"/> Crimplock	<input type="checkbox"/> Pad in	<input type="checkbox"/> Band in				

Stub	<input type="checkbox"/> Rigid	<input type="checkbox"/> Flexible	<input type="checkbox"/> Controlled glue line	<input type="checkbox"/> Fugitive glue	Position
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<input type="checkbox"/> Wrap	<input checked="" type="checkbox"/> Box	<input type="checkbox"/> Bag	Pads	100 Sets	Sheets	Packages
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FORM WILL BE COMPLETED BY

<input type="checkbox"/> Hand	<input type="checkbox"/> Typewriter	<input type="checkbox"/>
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ENTER ADDITIONAL INFORMATION ON PAGE 2	Prepared by	Approved by
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ADDITIONAL INFORMATION