



FORMS PRINTING SPECIFICATIONS

Requisition No.	Record No
Date prepared	

GENERAL DESCRIPTION

Title

File folder - OAS

Form No. ISP-3003	Dated 2017-05-25	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	9"	Wide	X	14.5"	High	Stub size	Tear out	Wide	X	High
------------	-----------	----	------	---	-------	------	-----------	----------	------	---	------

PAPER (State grade, type, colour, basis weight and reference to applicable CGSB standard.)

File folder
13 Pt. Caliper, Brown Kraft
Flat size: 18" X 14.5"
Folded size: 9" X 14.5"
Ink colour: Black
Corners: Square

Prints on 1 side only
Material must not be slippery/waxy

Carbons	Recessed	Protruding	
<input type="checkbox"/> Black <input type="checkbox"/> Blue Other	Inches	Inches	
Narrow	Uncarbonized	Write test requested?	No. of sets
<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	
Serial numbers	Ink colour	Crash	Individual parts			
From	To					
Size of margins	Front:	Top	Left	Back:	Top	Left

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"/>									
Binding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wire	Sew	Side	Score	Saddle	Fold	Crimplock	Pad in	Band in
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Stub	<input type="checkbox"/> Rigid	<input type="checkbox"/> Flexible	<input type="checkbox"/> Controlled glue line	<input type="checkbox"/> Fugitive glue	Position								

PACKAGING - EMBALLAGE

<input type="checkbox"/> Wrap	<input checked="" type="checkbox"/> Box	<input type="checkbox"/> Bag	Pads	100	Sets	Sheets	Packages
-------------------------------	---	------------------------------	------	-----	------	--------	----------

FORM WILL BE COMPLETED BY

<input checked="" type="checkbox"/> Hand	<input type="checkbox"/> Typewriter	<input type="checkbox"/>
--	-------------------------------------	--------------------------

ENTER ADDITIONAL INFORMATION ON PAGE 2	Prepared by	Approved by
--	-------------	-------------

ADDITIONAL INFORMATION