



FORMS PRINTING SPECIFICATIONS

Requisition No.	Record No
Date prepared 2020-08-25	

GENERAL DESCRIPTION

Title

Return Envelope 9" x 4 3/16" (RTR kit)

Form No. SC ISP-3514FE	Dated 2012-01-01	Stock Number	U I	Quantity
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<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
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MATERIAL - (Paper, card stock, carbon etc.)

Dimensions	Trim size	Wide X	High	Stub size	Tear out	Wide X	High
	9"	4 3/16"					

PAPER (State grade, type, colour, basis weight and reference to applicable CGSB standard.) Construction: Open side, Side Seam or Cross Back Full Glue Commercial Flap Prints on: Face, Back & Flap Ink colour: Black Sawtooth border at top and left of face must bleed and also appear on back & flap	Recycled Envelope paper (Sand or Natural) 24lb Envelope is not to be smaller than the size required
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Carbons <input type="checkbox"/> Black <input type="checkbox"/> Blue Other	Recessed Inches	Protruding Inches	
Narrow <input type="checkbox"/> Right <input type="checkbox"/> Left Inches	Uncarbonized <input type="checkbox"/> Right <input type="checkbox"/> Left <input type="checkbox"/> Top <input type="checkbox"/> Bottom	Write test requested? <input type="checkbox"/> Yes <input type="checkbox"/> No	No. of sets

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 Black	Proofs requested (No. & type) 1
Serial numbers From To	Ink colour	<input type="checkbox"/> Crash <input type="checkbox"/> Individual parts
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 <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	Band in
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 type="checkbox"/> Box	<input type="checkbox"/> Bag	Pads	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