



FORMS PRINTING SPECIFICATIONS

Requisition No.	Record No
Date prepared 2021-07-21	

GENERAL DESCRIPTION

Title

Double Window Envelope with Service Canada logo, Lettermail Indicia and 2D barcode

Form No. SC ISP-0610	Dated 2021-07-21	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 Envelope
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MATERIAL - (Paper, card stock, carbon etc.)

Dimensions	Trim size	Wide	X	High	Stub size	Tear out	Wide	X	High
	9.5"			4.25"					

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

24 LB Natural Kraft
Full glue straight flap - 1 9/16"
Straight flap with 3/16" double score
Top window -
Size: 3 1/2" x 3/4"
Position: Left 3/4" Bottom 2 3/4"

Bottom Window -
Size: 4 3/4" x 1 1/8"
Position: Left 3/4" x Bottom 7/8"
Use one piece of window film.

Outside seams
Print black on front and flap

DO NOT DOUBLE STACK ENVELOPES IN BOXES.

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 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
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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"/>									
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
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Position

PACKAGING - EMBALLAGE

<input type="checkbox"/> Wrap	<input checked="" type="checkbox"/> Box	<input type="checkbox"/> Bag	Pads	2000 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