Re Order Form

Date.:

Please Fax to Vale Labels: 01823 444188

Company Name:

Email:

Name:

Purchase Order No.: ☐

Tel No.:

Please Confirm Price:

Fax No.:

Signed:

Re-Order/Artwork No.: (If known)

Label Description:

Label Size:

Product:	Size:	Qty:	Proof Required?	Artwork Amends?
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐

Notes: (Details of Leading Edge, Reelage, Materials, Finish, etc. If different from last run)

Delivery Required By: / / 201 ☐AM ☐PM

Send to **OUR** client: ☐

Delivery Address:

Send Plain Cover: ☐

Use Our Delivery Note: ☐