



CUSTOM LABEL ORDER REQUEST

Fax your order: 707.773.1428

Email your order: sales@NewmaticMedical.com

NEWMATIC MEDICAL Phone: 1.800.228.1428 • www.NewmaticMedical.com

Orders will be placed upon receipt of signed proof copy. Expect proof within 2-3 days. ALL CUSTOM LABELS ARE NON-RETURNABLE.

Step 1: Contact Information

Contact Name: _____

Cust. ID# _____

Title/Dept: _____

Phone: () _____ Fax: () _____

E-mail: _____

Step 2: Your Custom Message

Adhere your label here, OR fill in your message

Step 4: Select Your Label Color

Standard (text color shown is only a recommended ink color) (-02)

- Red
- Yellow
- Sky Blue
- Royal Blue
- Green
- Fuchsia
- Purple
- Orange
- White

Brights (text printed in black ink only) (-01)

- Fluorescent Red
- Fluorescent Yellow
- Fluorescent Orange
- Fluorescent Pink
- Fluorescent Green

Step 5: Select Your Ink Color

Ink for White Labels available in:

- Black
- Green
- Red
- Blue

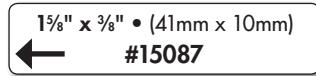
Ink for Color Labels only available in:

- White
- Black

Step 3: Circle Your Label Size



ROLLS	1-4	5-9	10+
Each	\$28	\$26	\$24



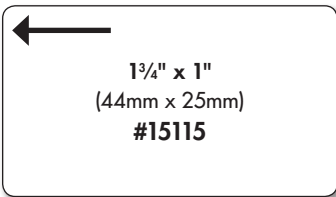
ROLLS	1-4	5-9	10+
Each	\$29	\$27	\$25

Step 6: Select Your Quantity

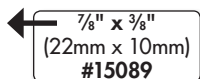
Quantity of Rolls (1000 labels per roll) _____

Step 7: Fax or email this request with your Purchase Order

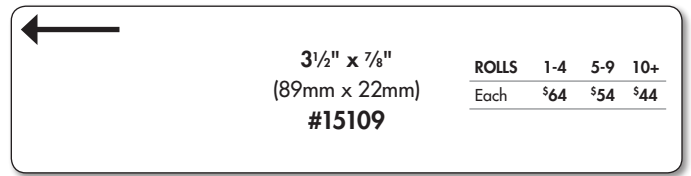
Fax: 707.773.1428 • Email: sales@NewmaticMedical.com



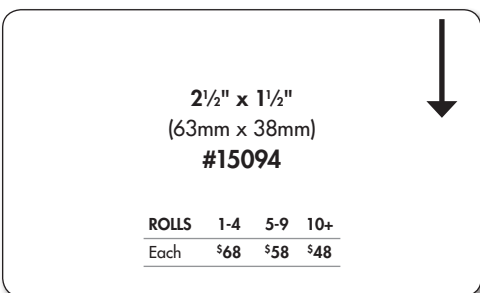
ROLLS	1-4	5-9	10+
Each	\$47	\$42	\$37



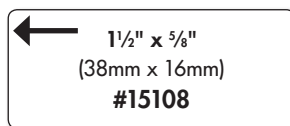
ROLLS	1-4	5-9	10+
Each	\$26	\$24	\$22



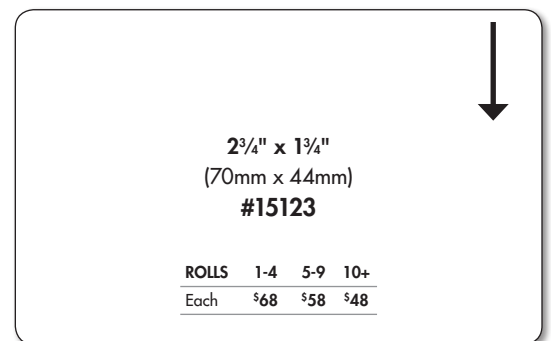
ROLLS	1-4	5-9	10+
Each	\$64	\$54	\$44



ROLLS	1-4	5-9	10+
Each	\$68	\$58	\$48



ROLLS	1-4	5-9	10+
Each	\$39	\$37	\$35



ROLLS	1-4	5-9	10+
Each	\$68	\$58	\$48



Arrow indicates direction of the label on the roll.