



(909) 913-6031

1721 S VINEYARD AVE # A, ONTARIO, CA 91761

NAVO@PRECISIONDIEENGRAVING.COM

Company Name	Date of Order	Shipping Date
Address	Ship Via	Shipper No.
City	Purchase Order Number	Contact
Phone/Fax Number	Note	Taxable Y / N

Press Model & Manufacture		No. of Print Cylinders
No. of Teeth	Pitch 1/8 1/32 Type of Steel D-2 SP Other _____	Gears TG ID

Type of Die		Anvils
Rectangle	Sheeter	Oval
Butt Cut	Circle	Perforator Type: TPI _____ TIE _____
Square	Special	Reversible / Non - Reversible
		Pillow Blocks TG ID
		Other TG ID

Shape Size	Corner Radius 1/8 Other
Cavittles Across	Space Across
Cavities Around	Space Around

Material To Be Cut	Application
Liner # _____ Face Stock _____	KissCut TM Liner Steel to Steel Crease Under Cut
Customer Supplied Material Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, attach sample	2- level (Piggy Back • Top Liner <input type="checkbox"/> OR Bottom Liner <input type="checkbox"/> Other _____

Die Line Supplied: Film Positive
Modem • Digital File • Fax copy

DIE # _____ DIE REPEAT _____

Other _____

Format: Mac PC Diskette or Zip

Program: Adobe Illustrator, Corel Draw

Name of File: _____

NOTE: For special shaped labels, please sketch position on die.
CAUTION: Position on the die is a mirror image of label.

Special Instructions: _____

FOR SHOP USE	Blank: _____ Pattern: _____ CNC: _____ Removed Material: _____
	Grind: _____ Sharpened: _____ Packed: _____ Shipped: _____
FOR OFFICE USE	O. D.: _____ ORDER TAKEN BY _____ Inv. _____