



PAPS LABEL ORDER FORM

ORDER DATE: _____

SOLD TO: _____ SHIP TO: (IF DIFFERENT THAN "SOLD TO")

Contact: _____

Phone: _____ Fax: _____ P.O. No: _____

Label Information This information will be printed on the labels.

Company Name: _____

Quantity: _____

SCAC Code: _____

Number of labels per set(Circle One): 1 2 3 Other _____

Starting Number: _____ (max 7 digits e.g. 0000001)

Shipment Method: UPS FedEx US Mail Other _____

Service: Overnight Expedited Ground Other _____

Payment Method:

C.O.D.(US customers only) Labels Xpress Account No. _____

Credit Card: MASTERCARD VISA AMERICAN EXPRESS

CARD #: _____ Exp. ____ / ____

Name on Card : _____ Signature: _____

| Label Quantity | Price in US funds |
|----------------|-------------------|
| 500 | \$ 59.75 |
| 1,000 | \$ 74.90 |
| 5,000 | \$ 164.50 |
| 10,000 | \$ 239.75 |

Prices are in US funds and do not include shipping and/or taxes.

FAX ORDERS TO: 716-898-8763 • E-MAIL ORDERS TO: SALES@LABELSXPRESS.COM

Labels Xpress, 245 Cooper Ave, Ste. 108, Buffalo, New York, 14150, USA

Toll Free Phone: 1-800-367-7336 Local Phone: (716) 875-9699