*Attach current label or*

*sketch your design in box*

Width: (inches) Height: (inches)

1. How many labels do you need?
2. Would you like your labels on Roll Sheet

How many per:

1. What size Core for your labels? Choose an item.
2. What type of Material

Xylene Resistant Standard Other

1. Laminate Type? Gloss Matte
2. Background Color?
3. Text Color?
4. Adhesive Type? Permanent Removable
5. Other Special Instructions:

1. Barcode Specifications:

1. Sequence Numbers: From: To:
2. Shipping Method: Choose an item.

3rd Party Account#

Easy Steps to your Customized Labels

1. Draw on the sample box to the left. Indicate the type of writing or detail you need on your label.
2. Complete the dimensions & other fields of the label design
3. Email your order request to [orders@cancerdiagnostics.com](mailto:orders@cancerdiagnostics.com) or

Fax to (877) 817-1716

1. We will review your diagram and call or email you back with any necessary questions and provide a quote.
2. We will send you a sample in .pdf format
3. Simply call or email with an order confirmation or with any additional changes once you receive your .pdf sample
4. We manage your future requests by maintaining the label specifications in our digital label library along with any consecutive numbering & layout requirements.

Company Information

Company Name:

Individual Name:

Phone Number:

Purchase Order #:

Address 1:

Address 2:

City: State: Zip:

Phone Number: ( )

Ext.

Fax Number: ( )

Email:

How do *you* prefer to communicate?

By Email

By Phone

No Preference