

LAKESHORE					SH DA	IP TE		REQUIRED REQUESTED			
LOOSELEAF CORPO	BINDER			P R	□REQUIRED		□FAX		□mail		
P O BOX 219					□ MATERIAL		BINDEF	R DEC BINDER		BINDER	
STEVENSVILLE MI 49127 269/429-6200 - Fax 269/429-3924		ORDER <i>Rev. 2-3-2003</i>			OVERALL H	l	×V	V	SP		
ORDER DAT	E	NAME PHONE			Z E	SHEET SIZE		X + INDE		ΞX	
		FAX					# D	INIOO	ODAOINO		
		PO#			M	CAPACITY	# K	INGS	SPACING		
SOLD TO:					T	ROUND	□str	R D			□ POST
					L	□std	□LW	1	□HD		NO BOOSTER
						STYLE			LOCATION		
					R	☐FLAT CONC	CEALED		ROUND	CONC	EALED
SHIP TO:						□BLACK	□ w	HITE	☐ NICKEL		OTHER
						□NONE (QTY	SIZ	ZE		
						□FLAT	□cui	RVED	FIBER		POLY
					EE TR S			□NATURAL □OTHE			IER
FOB	VIA			М	COVER MATERIAL						
PREPAID CHO	INV-YES	CHG	INV-NO	COLLECT	A T	GAGE			CODE#		
ADDITIONAL SHIPPING INFO						COLOR		GRAIN		FINISH	1
SHIP W/ORDER #					╏┖	BOARD		LINING			
QUANTITY						PADDING	□FC		SPINE		∃вс
ORDERED					LO AL	□HORIZONTAL □VERTICAL □INSIDE □OUTSIDE					
						□FC □SPINE □BC SIZE					
					L R S	LOCATION					
					B C	☐ 3 SIDE BCH	H	DE BCH	☐ DIAG BC	н 🗆 т	WIN 3 SIDE BCH
						LOCATION					
					Р О	☐ HORIZONT	AL 🗆 VEF	RTICAL	□INSIDE		OUTSIDE
					C K E	□fC	□вс		FULL] FLAP
						□CLEAR □SAO □SAI SIZE					
						□F C [SPINE	□в		PEN	CLOSED
CHANGES						DECORATION	ON	□NO DE	CORATION	□TRA	DEMARK
REPEAT OF DEXACT W/CHANGE					D E C	LIFC LISPINE LIBC LINSIDE FCLINSIDE BC					
ACCOUNT REPRESENTATIVE PRICE						O □ □ NO BLEED □ SIMULATE BLEED □ BLEED					
	REQ'D	FURN	ON HAND	AMOUNT	R A	□FC			SPINE		□вс
PROC					T	□SCREEN	DEF	BOSS	□STAMP		APPLIQUE
ARTWOF PRINTING PLATI					O N	COLORS					
STAMPING DI					1						
HEAT SEAL DI					VE	NDOR					
JONELI	FOB										
						LIST PRICE UNIT COST					
						MMISSION %		TOTAL SALE			