

CUSTOM STAMP ORDER FORM

QUANTITY

INK COLOR

- ☐ BLACK (Default) ☐ RED ☐ BLUE
PREMIUM INK *(Add'l Charge)
☐ GREEN ☐ VIOLET ☐ BROWN
☐ PINK ☐ ORANGE

DEALER

ROUTE

ADDRESS

CITY/STATE/ZIP

PHONE

FAX

ACCT I.D.

P.O.#

SELF-INKING

PRE-INKED

TRADITIONAL

PLASTIC DATERS

EMBOSSERS



☐ THRIFTY
*BLACK INK ONLY

- ☐ IDEAL 4911 ☐ TRODAT 4916
☐ IDEAL 4913 ☐ TRODAT 4918
☐ IDEAL 4914 ☐ TRODAT 4925
☐ IDEAL 4926 ☐ TRODAT 4727
☐ IDEAL 170R ☐ TRODAT 4729
☐ IDEAL 400R ☐ TRODAT 4750
☐ TRODAT 4000B ☐ TRODAT 5430
☐ TRODAT 4820 ☐ TRODAT 5440
☐ TRODAT 4846 ☐ TRODAT 5460



ITEM # _____



ITEM # _____



ITEM # _____



ITEM # _____

MISCELLANEOUS

- ☐ Proof ☐ Die Only
☐ Die & Remount Only
☐ Ink Pad: # _____
Ink Color _____
IDEAL Refill Ink: ☐ 6cc ☐ 2oz
Ink Color _____
ULTIMARK Refill Ink: ☐ .5oz ☐ 2oz
Ink Color _____

TYPE ALIGNMENT

- ☐ Flush LEFT ☐ Flush RIGHT
☐ CENTERED

DESIGN SPECIFICATIONS

- ☐ Return Art
☐ Camera-ready art attached
(black & white at actual size)

TYPE SIZE

Type will be sized to fit the image area, unless otherwise indicated. The type size will determine the length of the stamp. If requested size doesn't fit:

- ☐ Change Type Size
☐ Change Size of Mount/Machine

SPECIAL INSTRUCTIONS AND CUSTOM SERVICES

TYPESTYLES

☐ Art Emailed

.pdf, .tif or .eps - 600 dpi PC
Platform

INDICATE TYPE CODE BELOW:

LINE NO.	TYPE STYLE CODE	POINT SIZE	
1st Line			
2nd Line			
3rd Line			
4th Line			
5th Line			
6th Line			
7th Line			
8th Line			
9th Line			

OTHER _____

AG551 ☐ DALE WILLIAMS
1234 MAIN STREET
YOUR TOWN, USA 98765

EU551 ☐ DALE WILLIAMS
1234 MAIN STREET
YOUR TOWN, USA 98765

EU651 ☐ DALE WILLIAMS
1234 MAIN STREET
YOUR TOWN, USA 98765

HE551 ☐ DALE WILLIAMS
1234 MAIN STREET
YOUR TOWN, USA 98765

HE651 ☐ DALE WILLIAMS
1234 MAIN STREET
YOUR TOWN, USA 98765

HE661 ☐ DALE WILLIAMS
1234 MAIN STREET
YOUR TOWN, USA 98765

TR551 ☐ DALE WILLIAMS
1234 MAIN STREET
YOUR TOWN, USA 98765

TR561 ☐ DALE WILLIAMS
1234 MAIN STREET
YOUR TOWN, USA 98765

TR651 ☐ DALE WILLIAMS
1234 MAIN STREET
YOUR TOWN, USA 98765

TR661 ☐ DALE WILLIAMS
1234 MAIN STREET
YOUR TOWN, USA 98765

BCT USE ONLY

TYPESET _____
FILE _____
PROOF _____
QUOTE _____
☒ RETURN ☐ SAVE

DATE

SALESPERSON

I have proofed the above copy and accept full responsibility for its accuracy.

CUSTOMER APPROVAL _____