

Sender/customer

Customer/corporate name:	Contact person/customer:
Address:	Product no:
Zip code:	Product name:
City:	Reference/PO.no:

Printshop

Printing:	Date of delivery:
Contact person:	Time of delivery:
Contact number:	Place of delivery:

Delivery service (mark one option)

Priority <input type="checkbox"/>	Express <input type="checkbox"/>	Business <input type="checkbox"/>	Direct Mail <input type="checkbox"/>
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Issues (printshop must complete this section)

Job/task number.	Format	Weight range in grams	Units
Total			

International delivery

Amount of items to be distributed abroad (incl. Greenland and the Faroe Island)	Antal

Box/pallets information

No. of boxes	
No. of pallets	

Senders signature

Date and signature
Comments:

Control performed by (To be completed by Bladkompagniet)

Name / initials
Date and signature