



1-800-537-8816

Match-My-Label - Request

1. Print form
 2. Fill in information
 3. Mail with sample
- (You may also fill in information online before printing.)

Please provide us with a sample of your label and the information below. We will get back to you with a free analysis about the specific materials, ink colors and other features of your label! including pricing - within 24 hours of receiving your request. Fold on the lines to mail in #10 window envelope.

A few features of your labels might not be apparent from the sample you send to us. Answering the questions below will help us prepare a more accurate reply to your request.

1 How do you want your labels to come to you?

- on rolls on sheets individual pieces not sure

2. If your label includes numbering or barcodes, are either of these consecutive ! in a special sequence such as 10001, 10002, 10003, etc?

- no numbering not consecutive yes consecutive not sure

3. What quantity of labels are you planning to purchase? You can enter up to 3 quantities.

_____ qty _____ qty _____ qty

4. Does the adhesive on your label have special features such as being easy to remove without residue or making your label re-repositionable?

- no yes, please explain: _____

5. Is your label used indoors or outdoors?

- Indoors Outdoors Both

6. Do you have high quality digital artwork for your label?

- high quality artwork no artwork not sure
(Illustrator, FreeHand, Corel Draw, hi-res PhotoShop) (Additional fees apply - not all artwork can be recreated) (If you have a file, please specify what type it is below.)

Please add any special information or instructions that will help us with your request.

fold on dotted lines to align with #10 window envelope

PLEASE COMPLETE THE INFORMATION ON THE RIGHT ! THEN PRINT AND MAIL THE COMPLETED FORM ALONG WITH YOUR SAMPLE TO:

Your Name: _____

Company Name: _____

eMail: _____

Address: _____

fold on dotted lines above to align address below with #10 window envelope


 MaverickLabel.Com
 Attention: Match-My-Label Specialist
 120 W Dayton St.
 Edmonds, WA 98020-4180

Phone Number: _____

Thank you. We will respond to your request with 24 hours of receipt.