

Tyrrell Auto Centers July 13 2023 500 Work Folder labels 3x3.25
New product

9245

Christie Printing Service
P.O. Box 3057 | Cheyenne, WY 82003-3057
Phone: 630.464.9391 | email : CPrint@ChristiePrinting.com



FOR USE BY CHRISTIE PRINTING

Complete: 8-31-2023

Billed: 7-21-2023

Entered: 7-21-2023

Delivered: 7-21-2023 #579548

Received: 7-21-2023

TO: Discount Labels
P.O. Box 709
New Albany, IN 47151-0709

INVOICE TO:
Christie Printing Service
5711 Osage Ave., Suite C
Cheyenne, WY 82009

DELIVER TO:
Christie Printing Service
5711 Osage Ave., Suite C
Cheyenne, WY 82009

Purchase Order No. 9245

ORDER DATE 7-17-2023		SHIP VIA Cheapest way; Prepaid and add to our invoice. Include 2 example labels with the invoice.	F.O.B.	
Terms	Order 2307577199000 Approved 7-13-2023		For Resale Yes	For Use
QUANTITY		PLEASE QUOTE ITEMS LISTED BELOW	UNIT	PRICE
Quoted	UNIT			
500 (5 roles of 100)	500 labels	Provide a PROOF for approval prior to printing. Approved 17Jul2023. Work Folder labels • White labels • Black ink • The labels will be applied to manila file folders. • Finished size 3"w x 3-1/4"h (each label) • Must be able to be written on. • Dimensions: each label is 3"w x 3-1/4"h • On rolls of 100 • Refer to draft below This is a new product for our customer therefore no historical information is available.		\$133.53 \$ 10.00 proof \$ 8.95 freight \$152.48
IMPORTANT Acknowledge if unable to deliver by date required. Please refer to our PO9245 on all correspondence, including the Invoice.			BY: Cynthia L Duke	

COST
\$133.53
\$ 10.00 proof
\$ 8.95 freight Steve said \$8.95 ground freight
\$152.48

I=416069-2307 Date: 7-18-2023
Paid ck #: 6651 Date: 8-21-2023

Notes for Cynthia: Reorder inquiry: 7-13-2024

PRICE
Deliver to Cathy Thelen
Reference PO# 44700 on our invoice.
\$162.24
\$ 8.95 freight
\$171.19
\$ 10.00 onetime setup fee
\$181.19
\$10.27 6% Tax \$10.33
\$191.36 \$191.52
Paid ck #: 68839 Date: 8-9-2023

1 BOX/5 ROLLS/100 EA

ACCOUNT # _____
ADP SIGNED _____
THANK YOU CARD _____
DEDUCTIBLE AMT \$ _____
PAYMENT(S):
TYPE/AMT _____
TYPE/AMT _____
TYPE/AMT _____
TYPE/AMT _____
TYPE/AMT _____
TYPE/AMT _____

ACCOUNT # _____
ADP SIGNED _____
THANK YOU CARD _____
DEDUCTIBLE AMT \$ _____
PAYMENT(S):
TYPE/AMT _____
TYPE/AMT _____
TYPE/AMT _____
TYPE/AMT _____
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TYPE/AMT _____