

PEDIDO DE ORÇAMENTO PARA PRODUTOS RÓTULOS

Nome: _____ Data: _____

Endereço: _____

Telefone: _____ E-mail: _____

Contacto: _____ Fax: _____ NIF: _____

Quantidade: _____ Mil

Dimensões: X mm (alt x larg)

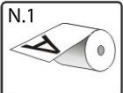
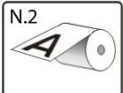
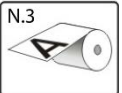
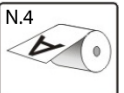

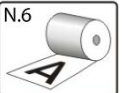

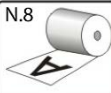
N.º Cores: _____

Suportes:

PP (Polipropileno)	½ Brilho	Térmico S/ K
PP trspt (transparente)	Térmico C/ K	PET
Outros: _____		

Acabamentos: Serigrafia Braille Estampagem a Quente

Enrolamento:

N.1 	N.2 	N.3 	N.4 	N.5 	N.6 	N.7 	N.8 
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Espaço entre Etiquetas: _____ mm Quantidade por Rolo: _____ Mil

Tubo interior (Diâmetro) 40mm 75mm Outros mm