



**STAMP, SEAL & SIGN ORDER FORM  
TO ORDER –FAX 952-894-7153  
FOR INQUIRIES – TEL 952-808-9900**

Internal use only

Please Print Neatly

State of Minnesota, Contract # 442142, Contract Release O-86(5)

**519075**

<b>STATE OF MINNESOTA</b>	<b>Order Date</b>	<b>PO #</b>	<b>Account #</b>
<b>Ship To Address:</b>	<b>Agency</b>	<b>Cost Center = Blanket / Line # / Org #</b>	
<b>Contact Name:</b>	<b>Phone</b> (      )      - <b>Ext.</b> <small>Area Code</small>		

**Ordering Procedures:**  
**Order One Product Per Form** -Multiples of the same item number may be ordered on one form.  
 Attach list of names or text if necessary.  
**Signature/Artwork** - Attach clean black & white copy to order form. Faxing is not recommended, as images are often inconsistent and distorted.  
**Sample Stamp Impressions** - Will be matched as close as possible.  
**Typeface** – Will be ALL CAPS, centered, regular block, with black ink if layout is not clear.

**STAMPS, DATERS & SEALS**

**ENGRAVED SIGNS**

<input type="checkbox"/> Pre-Inked Stamp	<u>Item #</u>	<u>Quantity</u>	<u>Item #</u>	<u>Quantity</u>
<input type="checkbox"/> Self-Inking Stamp	Ink Colors (If Required) Black <input type="checkbox"/> Red <input type="checkbox"/> Blue <input type="checkbox"/> Green <input type="checkbox"/> Violet <input type="checkbox"/> Optional Date Color : <input type="checkbox"/> Black <input type="checkbox"/> Red <input type="checkbox"/> Blue		<b>Plastic Color #:</b>	<b>Custom Size:</b> <i>(If applicable)</i> ____ X ____ inches
<input type="checkbox"/> Rubber Stamp	<b>LAYOUT INSTRUCTIONS</b> <input type="checkbox"/> Per Sample <input type="checkbox"/> REG BLOCK <input type="checkbox"/> BOLD <input type="checkbox"/> Script <input type="checkbox"/> ROMAN SERIF		<b>LAYOUT INSTRUCTIONS</b> <input type="checkbox"/> Per Sample <input type="checkbox"/> Flush Right <input type="checkbox"/> Centered <input type="checkbox"/> Flush Left <input type="checkbox"/> Upper/Lower <input type="checkbox"/> ALL CAPS <input type="checkbox"/> Border	
<input type="checkbox"/> Date/Number Stamp	<input type="checkbox"/> Upper/Lower <input type="checkbox"/> ALL CAPS		<b>SIGN MOUNTING</b> <input type="checkbox"/> double-sided tape (default) <input type="checkbox"/> suction cups <input type="checkbox"/> VELCRO™ <input type="checkbox"/> NONE <input type="checkbox"/> Adhesive Film (Industrial Applications) <input type="checkbox"/> Screw Holes & Screws	
<input type="checkbox"/> Embossing Seals	<b>Seal Type:</b> <input type="checkbox"/> Desk Seal <input type="checkbox"/> Pocket Seal	<b>Seal Impression From:</b> <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Bottom <input type="checkbox"/> Top	Special Notes for Engraved Product:	
<input type="checkbox"/> Refill Ink Pad <input type="checkbox"/> Ink	<input type="checkbox"/> Specific Brand/Model of Stamp:			

<b>COPY DESIRED – Please Print Neatly or Attach Sample</b>	<b>SPECIAL INSTRUCTIONS</b>
	<input type="checkbox"/> Send Quote <input type="checkbox"/> Send Proof

Mail Stamp Artwork or Signatures to: **INNOVATIVE OFFICE SOLUTIONS - STAMPS**  
 151 EAST CLIFF ROAD  
 SUITE 40  
 BURNSVILLE, MN 55337