

# CapSure Canada

## In Stock Order Form

### Wholesale Only

Item #: \_\_\_\_\_ Quantity \_\_\_\_\_  
Customer Name: \_\_\_\_\_ Salesperson: \_\_\_\_\_  
Customer Code: \_\_\_\_\_ (if applicable)  
Contact Name: \_\_\_\_\_

#### 1. Style and/or Description of Cap

\_\_\_\_\_

Blank Yes ( ) No ( )

.

#### 2. Embroidery ( )

( ) D/E Swatch Imprint

( ) Artwork

( ) Disk

( ) Film

( ) Sample Cap

( ) Others, please specify: \_\_\_\_\_

#### 3. Embroidery Details including Tether Screen printing \_\_\_\_\_

\_\_\_\_\_

#### EMBROIDERY LOCATIONS

1-A - ( ) Front Center

1-B - ( ) Front Right (Wearer's)

1-C - ( ) Front Left (Wearer's)

2-A ( ) Side Right (Wearer's)

3-A - ( ) Side Left (Wearer's)

4-A - ( ) Back Center

4-B - ( ) Back Right (Wearer's)

4-C - ( ) Back Left (Wearer's)

4. Ticketing:

- Hangtag
- Provided by customer
- Provided by CapSure (extra cost required)

- Price ticket
- Provided by customer
- Provided by CapSure (extra cost required)

Others, please specify: \_\_\_\_\_

5. Packaging:  Standard Packing (12pcs/polybag, 24pcs/inner box)

Special Packing, please specify: \_\_\_\_\_  
(extra cost required)

6. Samples

- Yes
- Sample Charges: \$ \_\_\_\_\_ Required:
- No

7. Pymt Term:  \_\_\_\_\_ % Deposit upfront, balance \_\_\_\_\_ upon delivery

Others, please specify: \_\_\_\_\_

8. Total Quantity: \_\_\_\_\_ pcs

Requested (minimum order quantity \_\_\_\_\_ doz per

Different Colors; \_\_\_\_\_ pcs per color

16. Required Delivery Date: \_\_\_\_\_ (in house)

By Air

By Ground: \_\_\_\_\_

9. Delivery Term:  FOB Toronto

Others, please specify \_\_\_\_\_

Please send your Order form: to

CapSure Canada  
34 Harriet Street  
Penetanguishene, Ontario  
L9M 1L1

Fax it- (603) 669-2529

E-mail- syndi@capsurecanada.com