# We Owe Form (Imprinted) 870-IMP & 871-IMP



Form# SA-1506-3



Form# SA-1506-4

Standard Stock Colors				
Part 1		White		
Part 2		Canary		
Part 3		White Tag		

Standard Crash-In	andard Crash-Imprint Ink Colors			
Black	<b>Red</b> (PMS 185)			
<b>Blue</b> (PMS 293)	Green (PMS 355)			

#### **Production Notes (For Internal Use)**

#### **Production: 085**

- Crash Imprint
- InDesign file created using pre-set template

#### **Product Description**

Get it in writing! Avoid missing essential paperwork or other items when delivering a vehicle. These forms ensure that you and your customer know what is owed!

#### **Product Specifications**

- 5-2/3" x 9-1/4"
- 3-part, snap-out, varying length on part 2, (870).
- 4-part, snap-out, varying length on part 2 & 3, (871).
- Available crash imprinted in 1 color only.
- Imprint area is approximately 4" wide x 3/4" tall.
- · Quantities: Minimum 500 / Incremental 500

#### Additional Information

Non-Standard Ink Colors: NA **Proof Charge:** Up to 3 Free

Plate Charge: NO

**Body Printing:** Additional Information can be crash imprinted on the form at an additional charge.

**Numbering:** Yes - Red ink only. Customer must supply the numbering sequence. Numbering must be 6 digits (i.e. 1 will be represented as 000001).

**Screens and Gradients:** NA

PMS Matching: NA

Bleed: NA

#### **Art Requirements**

- High resolution (300dpi) or fully editable vector artwork is required.
- Preferred file formats are InDesign (.indd), Illustrator (.ai or .eps), or Photoshop (.psd).
- If unavailable, artwork can be recreated if one of the following is provided:
  - 1. Photo/scan of existing artwork
  - 2. Description of copy and desired layout.

## Standard Imprint Header Standard Imprint City & Phone

## **WE OWE**

DEAL JACKET

NAME		STK. NO.	NEW	USED			
ADDRESS		YEAR	MAKE				
CITY	STATE	ZIP	MODEL				
PHONE		SERIAL NO.					
	SALESMAN		DEL. DATE				
QTY.	NAME (	OF ITEM		PART	LABOR		
)					7		
DATE OF ISSUAN	s WE-OWE with the understanding that it is valid for ICE, and that I must make an ADVANCE APPOore the above work can be performed.		DATE				
(FOR APPOINTM CUSTOMER	IENT CALL SERVICE DEPT.)		APPROVED				
COSTONETT				MGR			

## Standard Imprint Header Standard Imprint City & Phone



DEAL JACKET

NAME		STK. NO.	NEW	USED	
ADDRESS		YEAR	MAKE		
CITY	STATE	ZIP	MODEL		
PHONE		SE	RIAL NO.		
SA	ALESMAN		DEL. DATE		
QTY.	NAME	OF ITEM		PART	LABOR
h					
DATE OF ISSUANCE, and	/E with the understanding that it is valid that I must make an ADVANCE APP bove work can be performed.	for only (30) THIRTY DAYS FROM OINTMENT WITH THE SERVICE	DATE		
(FOR APPOINTMENT CA	LL SERVICE DEPT.)		APPROVED	MGR.	