



Barcode labels
GS1-128 labels

Do It Best GS1-128 Label Submit Form

Vendor Information

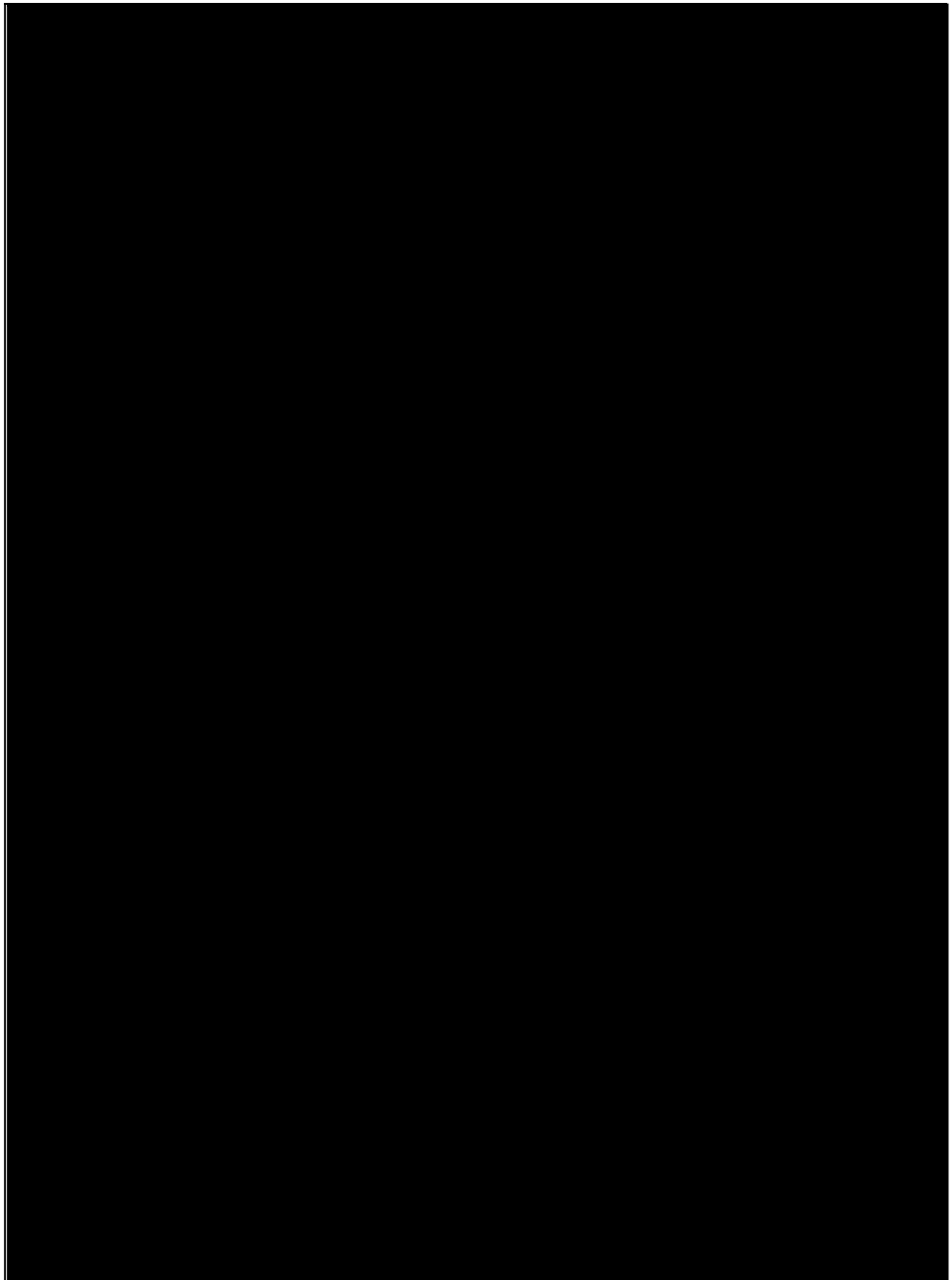
Vendor Name: _____
Company Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____
E-mail: _____
Website: _____

Testing Fee - GS1-128 Label:

Yes No Other
If Yes, amount: _____
If Other, specify: _____

Send Label Submit Form and Labels to:

Do it Best
1111 Airport Blvd
Ocala, FL 34476
Attn: GS1-128
Phone: 352-237-1234
Fax: 352-237-1235
E-mail: gs1@doitbest.com



Bar Code Graphics, Inc. Testing Agreement

To place bar code testing fees on a credit card, complete the following information and return to Bar Code Graphics, Inc.

Date: _____

Company Name: _____

Contact Name: _____

Email: _____ Phone: _____

I authorize Bar Code Graphics, Inc. (BCG) to use credit card information provided on this Testing Agreement for:

- Enclosed Bar Code Testing Form(s) ONLY - \$75.00 per label testing fee.
Total # of samples _____ x \$75.00 = \$ _____
- Enclosed Bar Code Testing Form(s), as well as any/all future ones submitted to BCG by the Company Name listed above.
 - o I understand that the cardholder is responsible for testing fees for any/all bar code testing form(s) submitted to BCG under the Company Name above, unless BCG is notified in writing prior to any testing forms being submitted.

Cardholder's Signature: _____ Date: _____

Cardholder's Email: _____@_____

I understand BCG will be applying bar code testing fees on the following credit card (select one):

Discover Visa American Express MasterCard

Cardholder's Name (as it appears on card): _____

Street Address (billing address): _____

City, State, Zip (billing address): _____

Credit Card # _____

Expiration Date: _____

Security Code: _____

Return completed and signed form to:

Bar Code Graphics, Inc.
875 North Michigan Avenue
Suite 2950
Chicago, IL 60611

Email: test@barcode-us.com

Fax: 312-664-4939