



Return via FAX : 03 95302355
 Or Email: sales@dccsaus.com.au

JOB SHEET

Date: / /

Client Details

Contact Name _____
 Company Name _____
 Address _____
 Suburb _____ State _____ Postcode _____
 Phone _____ E-mail _____

Campaign Details

Date of Campaign _____ Voucher Date _____
(valid until)
 Total Cost _____ Voucher Offer _____
(ie. \$5.00 off)

**NB: Price = \$2.00 + GST per mailer (includes mailer design of your choice, postage & delivery)
 One Off Artwork set up fee of \$75 + GST applies.**

| Mailer Code | Script Code | Qty | Number of Returns | Number of Non-Deliverables |
|---------------|-------------|-----|-------------------|----------------------------|
| | | | | |
| | | | | |
| | | | | |
| Total: | | | | |

Campaign Criteria

Please tick the appropriate box for each of the following:

| | | | | |
|----------------|--|--|--|---|
| NEW CUSTOMERS | Previous fortnight <input type="checkbox"/> | Previous month <input type="checkbox"/> | Previous 2 months <input type="checkbox"/> | Other <input type="checkbox"/> |
| LOST CUSTOMERS | Previous 2-3 months <input type="checkbox"/> | Previous 3-4 months <input type="checkbox"/> | Previous 4-6 months <input type="checkbox"/> | Other <input type="checkbox"/> |
| GOOD CUSTOMERS | Weekly <input type="checkbox"/> \$0-15 <input type="checkbox"/> | Fortnightly <input type="checkbox"/> \$16-30 <input type="checkbox"/> | Monthly <input type="checkbox"/> >\$30 <input type="checkbox"/> | Other <input type="checkbox"/> |

Approved _____

Date _____

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