

Customer Code: _____	Date / /
Job Name / PO: _____	
Company: _____	
City: _____	
Contact Name: _____	Phone: _____
Ship to Address: _____	
City, State, Zip: _____	

Material: Face _____ Back _____

Size: Door size only **Outside Back Edge Detail:** No Lip

Deco Lam®

Qty	Width	Height
Deco Lam® Sheets (987) Min Width 2", Max Width 46"		
	48"	96"
Deco Lam® Strips (987-CUST)		
		96"
		96"

Loose Foil (701)

_____ Lineal Ft. (Minimum order is 5 Lineal Ft.)
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Foil w/ PSA Backer (701)

Qty	Part #	Width	Height
		24"	96"

Crown Moldings

Qty	Description	Part #	Length
	CR433-8 (433)	3001	8'
	CR422-8 (422)	3002	8'
	CR424-8 (424)	3004	8'
	CR423-8 (423)	3003	8'

Base Moldings

	BA426-8 (426)	3007	8'
	BA448-8 (448)	3027	8'
	BA434-8 (434)	3008	8'

Miscellaneous Moldings

	SH413-8 (413)	3011	8'
	IC419-8 (419)	3009	8'
	OC420-8 (420)	3010	8'
	FM431-8 (431)	3013	8'
	SC428-8 (428)	3012	8'
	Rosette (478)	3014	N/A

Requested Ship Date _____ / _____ / _____
<input type="checkbox"/> Our Truck <input type="checkbox"/> Small Parcel <input type="checkbox"/> Freight <input type="checkbox"/> Will Call _____

_____ Write the word "Quote" in the space for a quote only. This is page _____ of _____ pages being faxed
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Bottle Racks Sold in Pairs

# of Pairs	Part #	Width	Height
Large Bottle Rack (483)			
	3157	21"	21"
	3158	27"	21"
	3159	33"	21"
Small Bottle Rack (482)			
	3153	21"	15"
	3154	27"	15"
	3155	33"	15"
Scalloped Bottle Rack (481)			
	3150	21"	2-1/2"
	3151	27"	2-1/2"
	3152	33"	2-1/2"

Valances

Qty	Description	Part #	Width	Height
	Straight Valance (474)			5-1/2"
	Cathedral Valance (480)			5-1/2"
	Eyebrow Valance (476)			5-1/2"
	Scalloped Valance (477)			5-1/2"

See Valance pricing page for Part #'s and Widths.

Fillers

Qty	Width	Height
Filler A (3250) - 1/16" BN on all 4 sides. No Modifications.		
Filler B (3251) - 1/16" BN 1 side only. Detail is required on 3 sides.		
Edge Detail: _____		
Filler C (3255) - Detail is required on all 4 sides. \$15 per piece option charge.		
Edge Detail: _____		

Toe Kick

Qty	Part #	Width	Height
	3015	94"	4"

Your primary form of payment will be applied unless otherwise requested.

Office Use Only
CSR: _____