

ORDER QUOTE

PAGE 1 OF ____

CUSTOMER # _____ COMPANY _____

PO # _____ DATE ORDERED _____ REQUESTED SHIP DATE _____

SHIP TO (IF DIFFERENT FROM BILLING ADDRESS): _____ SHIP VIA _____

COMPANY/NAME _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

CUSTOMER CONTACT _____

 STANDARD LEAD TIME RUSH (35% UPCHARGE) EXPEDITE (50% UPCHARGE)

MOLDING & TRIM

STYLE	QTY	SPECIES	LENGTH			FINISH	SHEEN
			8'	10'	12'		

BEADED BOARD

FACE		QTY	SPECIES	CUT LENGTH		FINISH	SHEEN
2"	4"			RANDOM	HEIGHT		

SPECIAL INSTRUCTIONS _____