

Print Order Form

Page # _____ of _____

Project name _____

Image number	_____	_____	_____	_____	_____
Image size	_____	_____	_____	_____	_____
Quantity	_____	_____	_____	_____	_____
Matte size (if applicable)	_____	_____	_____	_____	_____
Frame size (if applicable)	_____	_____	_____	_____	_____
Select one option					
Unframed and unmounted <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Unframed and mounted <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Borderless framed <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Rectangular matte unframed <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Rectangular matte framed <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Square matte unframed <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Square matte framed <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
For metal frames (select one finish)					
Enamel black <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Annodized silver <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Annodized dark grey <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
For wood frames (select one face)					
Flat face <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Bevel face <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Wood / Finish (select one)					
Maple with clear laquer <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Maple with black laquer <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Cherry with clear laquer <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Cherry with classic cherry stain <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Mahogany with clear laquer <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Mahogany with red/brown stain <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Mahogany with brown stain <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Custom color match — add on \$30 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Wall mounting systems (select one)					
Wall blocks (recommended) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Security wall mounts — add on \$5 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Wire and two floreat hangers <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Sidemark (if applicable)	_____	_____	_____	_____	_____
Cost per item	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

Project Billing & Shipping Information

Project name _____

Specifier / Designer (if applicable):

Name _____

Company _____

Address _____ Suite # _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

Purchase order # _____

Date desired by _____

Bill to:

Name _____

Company _____

Address _____ Suite # _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

Ship to:

Name _____

Company _____

Address _____ Suite # _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

Crating & shipping — Add on

(for estimating: on projects up to 1,000 — 10%; between 1,000 & 5,000 — 8%; over 5,000 — 5%)

Terms: 50% deposit with purchase order with approved credit. ProForma otherwise.