

Date _____
Showroom Contact _____
Order Number _____
Customer name _____
Customer Phone # _____
Expected Completion _____
Time/Date _____

Material: _____

Edge: _____

Line	Quantity	Height	Width	Door/ Drawer	Notes
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					

Please phone 9552 1245 if you have any questions about this form.