## PRICING/ORDER FORM for 24 mm

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REQUEST FOR PROPOSAL

ORDER

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FAX this form to: 888-891-9970

BILLING ADDRESS				SHIPPING ADDRESS			Today's Date:				
Company:			Co	Company:			Purchase Order:				
Contact:			Co	Contact:			Job Name:				
Address:				Address:			Desired Ship Date: (Allow 3-4 weeks from order date)				
City:							Ph # : Fax # :				
State: Zip:				State: Zip:							
Side Vi	ew Internal Cabinet Height	·	Front View	Track sy	* When on Recess Tr Please not must be m 5/8" to 3/4 cabinet sic	dering ack te Track ortised "into the les. ne internal urre from mortise.	rack system C	] 	375 Inches	Neither 1.094 Inches	
QTY Track		HEIGHT	DEPTH	Track OPTIONS	Operation	Handle Type	Lock Type	BSS Stops	Price	Total	
# A or	B Internal Cabinet Width	Internal Cabinet Height	Internal Cabinet Depth	Surface (S) or Recess (R)	Coil Take up, Spring, None	(See Prod. Guide)	(See Prod.		Each Door	PRICE (For office use only)	
			_								
				_							
	ED FREIGHT			in total):		TOTAL	PRICE O	F ALL DO	OORS :		
	PARED BY:	Date or paration		ng, but does not	or office use only)	ht costs.If thi	s proposa	is satisfa	ctory, you	(For office use only) may sign	

The total price includes preparation for shipping, but does not include freight costs. If this proposal is satisfactory, you may sign and return via fax at 888-891-9970 to confirm the order. Once this proposal is signed and returned, we can begin production on your Tambour Doors. This proposal is effective for 60 days.

I accept and confirm this order.

Order Confirmation Signature

Date