

# PLAQUE ORDER FORM

ITEMS PULLED  
 ITEM ORDERED

|   |       |                                     |
|---|-------|-------------------------------------|
| Organization/Business:                                      | Home: | Due Date:                           |
| Contact Name:   | Cell: | Delivery Comment:                   |
| Address:  | Work: | Email:                              |
| City:                      State:                      Zip: | Fax:  | P.O.#                      Deposit: |

|   |                |            |
|---|----------------|------------|
| Style #:                                | Page #/Catalog | Line 1     |
|   |                | Line 2     |
| Description:                            | Font:          | Line 3     |
|   | Ornament:      | Line 4     |
| Board Type:                             | Size:          | Line 5     |
|   |                | Line 6     |
| Plate Material:                         | Size:          | Line 7     |
| Core Color:                             |                |            |
| D/P:    Y    N                          | Size:          | Line 8     |
| Material:                               |                |            |
| Mylar:                                  |                | Line 9     |
| Mylar Holder:                           |                | Line 10    |
| Screws:    Y    N    Rosettes    Y    N |                |            |
| Saved as:                               | Qty:           | Price:     |
|   | Engraving:     | Logo/Misc. |
|   |                | Total:     |

|   |                |            |
|---|----------------|------------|
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|   | Engraving:     | Logo/Misc. |
|   |                | Total:     |

|   |                       |   |                |
|---|-----------------------|---|----------------|
| Order Taken By:   | Assembled By:         | Invoice #:  | Logo/Scan Fee: |
| Customer Approval of All<br>Layouts and Spelling:<br><br><b>X</b> _____ | Engraved By:          | Date Paid:  | Shipping:      |
|   | Engraving Checked By: | Discover <input type="radio"/> MC <input type="radio"/> Visa <input type="radio"/> Amex <input type="radio"/> | Subtotal:      |
|   | Shelf Location:       | Cash <input type="radio"/> Check# <input type="radio"/>   | Tax:           |
|   |                       |   | Total:         |