

# Order Form

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<b>B I L L T O</b>		<b>S H I P T O</b>	
	COMPANY NAME		
	ADDRESS		
	CITY, STATE, ZIP ( ) / ( )		
	TELEPHONE NUMBER & FAX NUMBER		
P.O. Number	SHIP VIA: <input type="checkbox"/> UPS <input type="checkbox"/> AIR <input type="checkbox"/> OTHER RESIDENTIAL <input type="checkbox"/> YES <input type="checkbox"/> NO		

## LETTER SPECIFICATION

<input type="checkbox"/> CAST <input type="checkbox"/> FABRICATED <input type="checkbox"/> PRECISION CUT <input type="checkbox"/> OTHER _____ <input type="checkbox"/> ALUMINUM <input type="checkbox"/> BRONZE <input type="checkbox"/> BRASS <input type="checkbox"/> OTHER _____			
LETTER STYLE	<input type="checkbox"/> UPPER CASE <input type="checkbox"/> UPPER/LOWER	HEIGHT	DEPTH
FINISH COLOR			
MOUNTING TYPE <input type="checkbox"/> FM-4 <input type="checkbox"/> FM4-A <input type="checkbox"/> PM-1 <input type="checkbox"/> PM-1A <input type="checkbox"/> BAR MOUNT <input type="checkbox"/> SPECIFY _____			
PROJECTION	TEMPLATE <input type="checkbox"/> YES <input type="checkbox"/> NO LENGTH	ADHESIVE <input type="checkbox"/> YES <input type="checkbox"/> NO	
APPROVAL DRAWINGS <input type="checkbox"/> YES <input type="checkbox"/> NO NO. OF COPIES _____	PATTERN/ARTWORK (IF NEEDED) <input type="checkbox"/> A.R.K. TO PROVIDE @ ADDNL. COST <input type="checkbox"/> CUSTOMER TO PROVIDE		

## TEXT

	QTY/SIZE	UNIT COST	TOTAL
/			
/			
/			
/			
TEMPLATE LETTER HEIGHT X NO. OF LETTERS X 20¢ = COST (NET) (Minimum \$10.00)			
MOUNTING ADHESIVE 1 TUBE WILL BE PROVIDED PER 10 LETTERS APPROX.		\$3.00 ea.	
		<b>TOTAL</b>	

## PLAQUE SPECIFICATION

**ATTACH TEXT SHEET**

<input type="checkbox"/> CAST <input type="checkbox"/> ETCHED <input type="checkbox"/> ALUMINUM <input type="checkbox"/> BRONZE <input type="checkbox"/> BRASS <input type="checkbox"/> OTHER _____	
LETTER STYLE	TEXTURE
BORDER	FINISH
SIZE	MOUNTING TYPE <input type="checkbox"/> NO. 1 <input type="checkbox"/> NO. 2 <input type="checkbox"/> NO. 3 <input type="checkbox"/> NO. 4 <input type="checkbox"/> NO. 5
APPROVAL DRAWINGS <input type="checkbox"/> YES <input type="checkbox"/> NO NO. OF COPIES _____	PATTERN/ARTWORK (IF NEEDED) <input type="checkbox"/> A.R.K. TO PROVIDE @ ADDNL. COST <input type="checkbox"/> CUSTOMER TO PROVIDE

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

# A.R.K. RAMOS

## Architectural Signage Systems

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