PR	ODUCT ORDER F	Customer/Company Name:				Salesperson/Contact Name:			
	AC MOULD & MILLWORK	Customer Phone #:				Customer Email Address:			
1115 GORDON DRIVE			Customer PO #:				Customer Tag/Sidemark/Job Name:		
KELOWNA, BC V1Y 3E3			Date Ordered:				Date Material Available to AC Moulding:		
<b>OFFICE</b> : 250-469-2166					(MM/D	D/YYYY)	(MM/DD/YYYY)		
GENERAL & TECHNICAL QUESTIONS:			Customer Date Required/Install Date:				Expedite Order?:		
info@acmouldingmillwork.com			(M M / DD/ YYYY) Is This an Add-On Order?:				☐ No ☐ Yes (Subject to Rush Fees)		
<b>NEW ORDER SUBMISSIONS</b> : orders@acmouldingmillwork.com			□ No □ Yes → Original PO # or ACM Invoice # or ACM WO #:						
Material Type:			wood □ Vinyl/LVP □ Laminate □ Other:						
(Multiple types may be selected)			, , , , , , , , , , , , , , , , , , ,						
Material Manufacturer: Material S		eries/Collection: Mater			Materi	rial Colour Name:			
		rpe (Vinyl/LVP Only): Pl ☐ Foam ☐ No Backing/Glue Down			Plank [	# of Boxes/Planks Supplied:			
Line #	Product (Per ACM Pro	oduct & Pri	ce List)   Quantity   Size/Length   Description*						
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
*For N	osings, specify Flush, Overlap,	, and/or Join	ted. For R	educers, specify	Flush or Ove	erlap, and	d difference in	n floor heights, i.e. drop dimension.	
Additi	onal Information/Diagram	ns/Notes (P	lease ind	licate on each	diagram th	e corres	sponding Lin	e # from the table above):	
I									

<b>*</b>