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Drawer Box Order Form

Purchase Order # _____

Job Name _____

Customer Name	
Mailing Address	
City, State, Zip	
Phone	Fax

Customer Name	
Street Address	
City, State, Zip	
Phone	Fax

Date Ordered	Ordered By	Ship Via
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Select Options: **Unassembled** (No plywood bottom, no finish.) **Assembled** with 1/4" plywood bottom. If assembled, specify plywood species. Species (_____) Specify Unfinished or Finished Clear

Description	Qty	Height*	Width	Depth	Species	Details

Remarks

* **Note:** Height = height of front & back (sides are 1/8" lower)
Width = width of front (including lip if lipped front)