



Date: _____
 Company: _____
 Address: _____
 City: _____
 State: _____ Zip: _____

Contact: _____
 Phone: _____
 Cell/Text: _____
 Fax: _____
 Email: _____
 PO#: _____

Shipment Method

I will Pick up

Job Label ID: _____

Ship to my location

Commercial w/Dock
 Commercial w/o Dock
 Residential Address

Wood Specie

5/8" Birch
 5/8" Maple

TIMBERCRAFT
 Custom Dovetailed Drawers

800-345-4930-T

860-355-1274-F

info@timbercraftdrawers.com

Specify under mount slide model

Check applicable option boxes

| Line # | Qty | Ht. | Width | Depth | Slide Notch | Scoop Front | Side Scallops | File Rails | Divided Drawer | Spice Tray | U-Shape | Sliding Storage Drawer | Bread Box | Cutlery Dividers | Other Options |
|--------|-----|-----|-------|-------|-------------|-------------|---------------|------------|----------------|------------|---------|------------------------|-----------|------------------|---------------|
| 1 | | | | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | | |
| 8 | | | | | | | | | | | | | | | |
| 9 | | | | | | | | | | | | | | | |
| 10 | | | | | | | | | | | | | | | |
| 11 | | | | | | | | | | | | | | | |
| 12 | | | | | | | | | | | | | | | |
| 13 | | | | | | | | | | | | | | | |
| 14 | | | | | | | | | | | | | | | |
| 15 | | | | | | | | | | | | | | | |

Notes