



# BUILDERS

Finish Supply

(714) 540-7117

FAX (714) 957-6094

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 Daytime Phone ( \_\_\_\_\_ ) \_\_\_\_\_

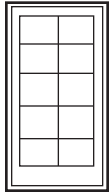
## SUPERIOR Clad/Wood Swinging French Doors WORK SHEET

Height (Outside Dimension) (check one)

- 6/8 = 79-1/2"       8/0 = 95-1/2"

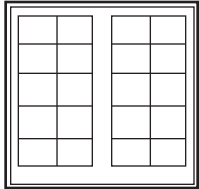
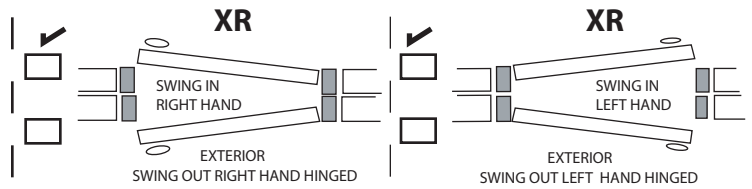
- Quote  
 Order

Date: \_\_\_\_\_  
 PO#: \_\_\_\_\_



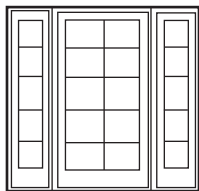
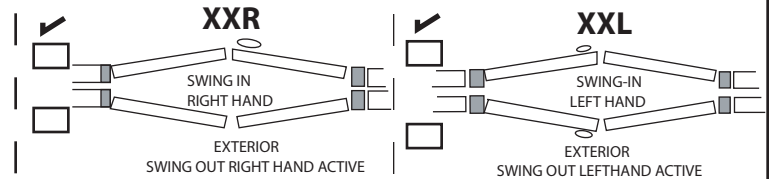
### UNIT WIDTH O.D.

- 2/10    2/8 Door     33-3/4  
 3/2     3/0 Door     37-3/4



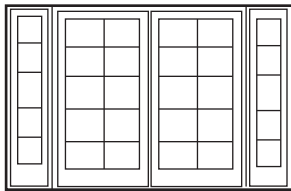
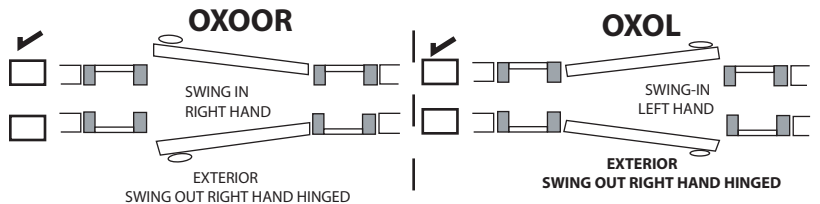
### Unit Width O.D.

- 5/0     2-4 X 2-4     58-1/2  
 6/0     2-10 X 2-10    70-1/2  
 6/4     3-0 X 3-0      74-1/2



### Unit Width O.D.

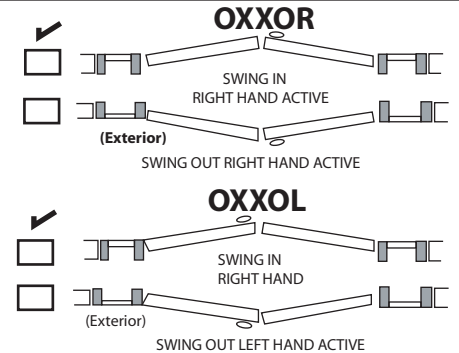
- 6/0     1-2 x 3-0 x 1-2    69-1/4"  
 8/0     2-2 x 3-0 x 2-2    93-1/4"



### Unit Width O.D.

- 8/0     1-2 x 2-6 X 2-6 X 1-2     94"  
 10/0    1-10 x 2-10 X 2-10 X 1-10    118"  
 12/0    2-8 X 3-0 X 3-0 X 2-8        142"

NOTE: 12/0 SIDELITES ARE FIXED ONLY



If size desired is not listed above, write in here

UNIT Width \_\_\_\_\_ x Height \_\_\_\_\_ x Door Size \_\_\_\_\_ x

1. Base Unit Price:	<input type="checkbox"/> Dual Glazed	<input type="checkbox"/> Single Glazed	<input type="checkbox"/> SCULPTURED	<input type="checkbox"/> PROVINCIAL (STDL)	\$ _____
Grids	<input type="checkbox"/> None	<input type="checkbox"/> Flat	<input type="checkbox"/> OTHER (Specify)	_____	\$ _____
Pattern:	<input type="checkbox"/> V-Groove	<input type="checkbox"/> Tiffany	<input type="checkbox"/> OTHER (Specify)	_____	\$ _____
1-1/4" Bevel:	<input type="checkbox"/> Colonial (Std)	<input type="checkbox"/> Marginal	<input type="checkbox"/> 4-1/8" FIN	<input type="checkbox"/> 4-9/16" FIN	\$ _____
2. Frame	<input type="checkbox"/> NoNo	<input type="checkbox"/> Yes	<input type="checkbox"/> HINGED	<input type="checkbox"/> CASEMENT	\$ _____
	<input type="checkbox"/> Retro - Fit Frame	<input type="checkbox"/> Block Frame	<input type="checkbox"/> MEDIUM OAK	<input type="checkbox"/> DARK Oak	\$ _____
3. Swing	<input type="checkbox"/> 7-1/4" Frame Extender	<input type="checkbox"/> Out	<input type="checkbox"/> RED OAK	<input type="checkbox"/> Driftwood	\$ _____
4. Sidelite:	<input type="checkbox"/> In	<input type="checkbox"/> Fixed	<input type="checkbox"/> RED MAHOGAMNY	<input type="checkbox"/>	\$ _____
5. Sill Material	<input type="checkbox"/> Not Applicable	<input type="checkbox"/> Match Exterior Color	<input type="checkbox"/> WHITE WASH MAPLE	<input type="checkbox"/>	\$ _____
6. Interior Finish	<input type="checkbox"/> Bronze Anodized	<input type="checkbox"/> Light oak	<input type="checkbox"/> BRONZE	<input type="checkbox"/>	\$ _____
	<input type="checkbox"/> Unfinished Oak	<input type="checkbox"/> Brown Cherry	<input type="checkbox"/> WHITE	<input type="checkbox"/>	\$ _____
	<input type="checkbox"/> Unfinished Cherry	<input type="checkbox"/> Brown Mahogany	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
	<input type="checkbox"/> Unfinished Mahogany	<input type="checkbox"/> Clear Maple	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
	<input type="checkbox"/> Unfinished Maple	<input type="checkbox"/> Painted White	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
	<input type="checkbox"/> Unfinished Pine	<input type="checkbox"/> Almond	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
7. Exterior Colors	<input type="checkbox"/> White	<input type="checkbox"/> White brass	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
8. Hardware Color	<input type="checkbox"/> Polished Brass	<input type="checkbox"/> Yes	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
9. Opt. Brick Mould	<input type="checkbox"/> None	<input type="checkbox"/> 2-1/4" TRIM	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
10. Interior Trim	<input type="checkbox"/> No Trim	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
11. Other Options (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____

Note: Items printed in bold italics are priced option.

When completed fax to (714) 540-7117

TOTAL PRICE \$ \_\_\_\_\_