Framing Fool

PHONE: 508.543.8303
FAX: 508.698.0135

Custom Framing Order Form

Studio Name: _____

Address: _____

Phone: _____ Fax: _____

Customer Name: _____

Order Date: _____ Need By: _____

Frame Number: **Price Code:**

Frame Company Name: *please circle* *Larson Juhl* *Roma* *Decor*

☐ **Frame Only -** Including dry mount and backing **Photo/Frame Size:** _____

☐ **Frame with Liner -** Liner Size: ☐ 1” ☐ 1 1/2” ☐ 2”

☐ **Custom Framed with Matting & Glass**

☐ **Non-Glare or Conservation UV Glass add $15.00 - $35.00**

Photo Size _____ **Frame Size:** _____ **Filet Number:** _____

☐ **Double Matting** **Top Mat Size:** _____ **Bottom Mat Size:** _____

2 ½ Mat Standard unless otherwise specified

☐ **Signature Boards 5” Mat**

☐ **Double Matting** **Top Mat Number:** _____ **Bottom Mat Number:** _____

☐ **Storyboard Panel**

Number of Prints: _____ **Size of Prints:** _____

Frame Orientation: ☐ Vertical ☐ Horizontal

Mat Number(s): _____

Special Instructions

Description of Photo: _____