



STANDARD SIZES TO CUT FROM

- | | | | | | | | |
|--------------------------------|--------------------------------|---------------------------------|-----------------------------------|----------------------------------|----------------------------------|-----------------------------------|--------------------------------|
| <input type="checkbox"/> 36x48 | <input type="checkbox"/> 45x53 | <input type="checkbox"/> *46x60 | <input type="checkbox"/> ***48x48 | <input type="checkbox"/> 48x60 | <input type="checkbox"/> 48x72 | <input type="checkbox"/> 48x96 | <input type="checkbox"/> 60x60 |
| <input type="checkbox"/> 60x72 | <input type="checkbox"/> 60x84 | <input type="checkbox"/> 60x96 | <input type="checkbox"/> *60x120 | <input type="checkbox"/> **72x72 | <input type="checkbox"/> **72x96 | <input type="checkbox"/> **72x120 | |

* (ROLLAMAT, SUPERMAT, NON-STUDDED ONLY)
 ** (ULTRAMAT AND ROLLAMAT ONLY)
 *** (EXECUMAT ONLY)

- Round Corners
- Straight Corners
- Beveled Edge
- Noted on DWG

PLEASE CHECK YOUR MAT TYPE BELOW

- | | | | | | | |
|------------------------------------------------|------------------------------------------------|---------------------------------------------------|------------------------------------------------|------------------------------------------------|---------------------------------------------------|--------------------------------------------------|
| <input type="checkbox"/> EXECUMAT (EX) 300 mil | <input type="checkbox"/> ULTRAMAT (UL) 220 mil | <input type="checkbox"/> GLASS CLEAR (GC) 220 mil | <input type="checkbox"/> ROLLAMAT (RO) 190 mil | <input type="checkbox"/> SUPERMAT (SU) 150 mil | <input type="checkbox"/> NON STUDDED (EV) 150 mil | <input type="checkbox"/> ANTISTATIC (AS) 145 mil |
|------------------------------------------------|------------------------------------------------|---------------------------------------------------|------------------------------------------------|------------------------------------------------|---------------------------------------------------|--------------------------------------------------|

SHIP TO _____
 ADDRESS _____

 CITY, STATE, ZIP _____
 PHONE _____
 EMAIL _____

BILL TO _____
 SAME AS SHIP TO

 FAX _____

VISA MC AMEX DISC CALL BACK CARD # _____ EXP(MM/YYYY) _____

