

Contact Info:

Company: _____

Website: _____

Rep: _____

E-mail: _____

Phone: _____

Fax: _____

Exhibit Rendering Info:



Please Proceed with a Rendering of Project #: _____

Client / Tag Name: _____

Purchase Order #: _____

Requirements:

Colors:

☐ Laminate Panel:

A: _____ C: _____

B: _____ D: _____

☐ Fabric Panel:

A: _____

B: _____

☐ Carpet: _____ Inlay: _____

☐ Background: _____

Graphics:

☐ Images / Graphics

☐ Logo (High Res):

PMS Color:

☐ E-mail To: design@abex.com

☐ Upload To: ftp.abex.com

Rendering:

Camera Views:

☐ Eye Level ☐ Left

☐ Birdseye ☐ Right

Size:

☐ 11 X 8.5

☐ 17 X 11

☐ Other _____ X _____

Resolution:

☐ Low Res

☐ High Res

Fees:

☐ Color Rendering:

☐ Graphic Services:

OFFICE USE ONLY

☐ Standard Color Rendering:

☐ _____ # of Additional Hours

Total Charge: _____

O.K. to Amend Design as needed:

Additional Information:

Completed Rendering will be Sent Via E-mail

Please Fax this Completed Form with Your Line Drawing & Color Call Outs To: **818.301.2551**