



Date: _____

Phone Model: TeleMatrix 9602MWD5

Hotel Name: _____

Hotel Number: _____

Hotel Fax: _____

Material: Clear Overlay

FP Quantity: _____

Approved Not Approved

X
Signature of Approval Required

Print Name _____

Date _____ PO# _____

If Not Approved, mark changes on faceplate or note them below.

ROOM

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
1	2 ABC	3 DEF	<input type="text"/>	Pause/Redial
4 GHI	5 JKL	6 MNO	<input type="text"/>	Locate
7 PQRS	8 TUV	9 WXYZ	<input type="text"/>	Vol ▲
*	0	#	<input type="text"/>	Vol ▼
Hold	Line 1	Line 2	Mute	Speaker
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
FOR MESSAGE				PRESS HERE

NOT ACTUAL SIZE / JUST A PROOF