

Window Blinds To Go

21790 Bulverde Rd. Suite 2
San Antonio, TX 78259

(210) 495-9995 Office, (210) 495-9994 fax,

Page ____ of ____

	ROOM LOCATION	WIDTH	LENGTH	INSIDE or OUTSIDE MOUNT	BRAND	BLIND TYPE OR BLIND NAME	TILT LOC. LEFT IS STANDARD	LIFT LOC. RIGHT IS STANDARD	SPECIAL CONTROL LENGTH	COLOR NUMBER	COLOR NAME	OTHER INFO	PRICE EACH
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													
13													

CUSTOMER NAME			PHONE NUMBER		ALT. PHONE NUMBER		SUB TOTAL	
ADDRESS			CITY		STATE	ZIP CODE	W/ TAX	
EMAIL			OTHER INFORMATION				CK / AUTH #	

CONTRACT:
My signature is an acknowledgement that I have verified all of the information on this form. I also understand that I am ordering custom window treatments and once production has begun on custom products the order cannot be cancelled and I accept full financial responsibility for this order. Window Blinds To Go will contact buyer as soon as possible in the event of a back order or delay.

X _____ date _____

Order Date	Vendor	Reference #	Appx Ship Date

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14													
15													
16													
17													
18													
19													
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32													
33													
34													
35													
CUSTOMER NAME						PHONE NUMBER		ALT. PHONE NUMBER		SUB TOTAL			
ADDRESS						CITY		STATE	ZIP CODE		Page _____ of _____		