

# Designer Cellular Shades ORDER FORM

Shade & Light, Inc. / GCNA  
FAX 800 318 2168

Customer Name / Acct #	PO #	Date: / /
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PAYMENT OPTIONS      TERMS       PRE-PAY

**SHIP TO:**

Name:	
Address:	
Tel:	
Fax:	

**BILL TO:**

Name:	
Address:	
Tel:	
Fax:	
Card Type	<b>VISA</b> <b>M/C</b> <b>EXP.</b> /
Credit Card #	<b>CID #</b>

LINE	QTY	Measurements			Control Type			Style		Fabric			Lift Cord		Bracket		EXT. POLE
		WIDTH	LENGTH	COLOR	SINGLE PULL	CORDLESS	SEMI-CORDLESS	TD/BU	ARCHED	3/8" SINGLE	3/8" DOUBLE	9/16" B/O	RIGHT	LEFT	IB	OB	
1																	
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	

The Customer Acknowledges that:

Order details are accurate.  
No changes or cancellations once order is in production.

**SPECIAL INSTRUCTIONS:**