OEM Shades Inc - SSLT Blind Order Form

Sold To:

Name:
Company:
Address I:
Address 2:
City: State/Prov.
Country: Zip/Postal
Telephone: ( ) -
Fax No.: ( ) -

Ship To:

Name:
Company:
Address I:
Address 2:
City: State/Prov.
Country: Zip/Postal
Telephone: ( ) -
Fax No.: ( ) -

OEM Order No:

Date:

PO Number:	Contact:	Ship Via:	Date:
Telephone: ( ) -	Date Required:	Job Name:	Rep:

Product Must Be Used With 1/8" Inch Glass.	Colors(12.5mm Slat): 0102 White	Special Instructions/Notes:

Quantity	Glass Width	Glass Height	Sightline Deduction	Color/Description	Slide Operator	Slide Operator Location		Unit Price	Extended Price
					0219L	Left	Right		
					0219L	Left	Right		
					0219L	Left	Right		
					0219L	Left	Right		
					0219L	Left	Right		
					0219L	Left	Right		
					0219L	Left	Right		
					0219L	Left	Right		
					0219L	Left	Right		
					0219L	Left	Right		

All measurements given must be in inches.