

Office Use	Only
Proposal:	
Project:	

Contact Info	ormation		Order Information		
Facility	•		 order		quote
			Date	•	
			Project Name	•	
Address	•		Measured By	•	
Phone	•	_	<b>Shipping Address</b>	•	
Email	•		same as cor	ntact	contact me for shipping instruction
			Ship Date	•	

Line Item	Area Name		Product		Size (in inches)		Installation Style (check one)		Color		Controls		Hold Down	Valance	
			Name	Style		Height	I B	ОВ	No.	Name	Location	Wand or Cord		Deluxe	Standard
1															
2															
3															
4															
5															
6															
7															
8															
9															
10															

Legend:

Controls – Location

Installation Style

IB = inside mount

OB = outside mount

RR = right left

RR = right right

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