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FAX ORDER FORM FOR BLINDS & SHADES

NAME OF THE PROPERTY: _____

ADDRESS: _____

MANAGEMENT COMPANY: _____

TELEPHONE# _____ FAX# _____

SHOP/CELL# _____

DATE OF ORDER: _____ PURCHASE ORDER# _____

ORDERED BY: _____

Roller Shade: _____ Vertical Blind _____ 1" - 2" - 2½" Fauxwood Blind: _____ 1" - 2" Mini blind: _____

Color: _____

ITEM #	QTY	WIDTH	LENGTH	IB	OB	WAND	CORD	CHAIN	CONTROLS		NOTE'S/LOCATION
									LEFT	RIGHT	
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											

- IB – INSIDE BRACKET (INSIDE WINDOW FRAME) OB – INSIDE BRACKET (OUTSIDE WINDOW FRAME)
- WAND TILT OR CORD TILT

You can also use this same order form for just Headrails or Louvers only orders.