



FURNITURE COM FORM

DATE: _____

SHOWROOM LOCATION: _____

SALES ASSOCIATE: _____ No. _____

CUSTOMER NAME: _____ CLIENT PO#: _____

ITEM #: _____ ITEM NAME: _____

SIDE MARK: _____

FABRIC #1
 PLACEMENT: _____
 PATTERN: _____
 COLOR: _____
 SUPPLIER/PO#: _____
 YARDS TO BE SENT: _____

SPECIAL INSTRUCTIONS FABRIC #1

UP THE BOLT RAILROAD Other:

PLEASE PROVIDE CUTTING IF AVAILABLE

FABRIC #2
 PLACEMENT: _____
 PATTERN: _____
 COLOR: _____
 SUPPLIER/PO#: _____
 YARDS TO BE SENT: _____

SPECIAL INSTRUCTIONS FABRIC #2

UP THE BOLT RAILROAD Other:

PLEASE PROVIDE CUTTING IF AVAILABLE

FABRIC #3
 PLACEMENT: _____
 PATTERN: _____
 COLOR: _____
 SUPPLIER/PO#: _____
 YARDS TO BE SENT: _____

SPECIAL INSTRUCTIONS FABRIC #3

UP THE BOLT RAILROAD Other:

PLEASE PROVIDE CUTTING IF AVAILABLE

NOTE: UNLESS INSTRUCTIONS ARE CLEARLY STATED ON YOUR ORDER, THE FACTORY RESERVES THE RIGHT TO USE THEIR BEST JUDGEMENT CONCERNING THE APPLICATION ON YOUR FABRIC.

SIGNATURE _____ DATE _____