PERRY LUXE

520-884-5152
info@perryluxe.com

Date:

Side Mark:

ROMAN SHADE QUOTE FORM

Account Name:			
Address:	City:	State:	Zip:
Phone:	Contact:	Email:	

PLEASE FILL OUT 1 FORM FOR EACH FABRIC ON AN ORDER

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													OFFICE USE			
	Room	**Style**	**Qty**	**Width**	**Length**	**IM or OM**	**Trim or Banding Y or N**	**Trim or Banding Location**	**Operation**	**Lining Style**	**Lining Color**	**Interlined Y or N**	**Fabric Yardage**	**Banding /Trim Yardage**	**Unit Price**	**Net Price**
EX	Bath	Flat Roman	1	60	48	IM	N	n/a	Clutch	Light filtering	Ivory	N				
1																
2																
3																
4																
5																
6																
7																
8																
9																
10																

Fabric Name	**Pattern & Color**	**Roll Size**	**Railroaded Y or N**	**Banding Fabric Name**	**Banding Fabric Pattern & Color**	**Trim Name & #**	**Trim Color**

Notes:

