



Company:

Acct Number:

P.O. Number:

Sidemark:

Date:

Client Name:

Address:

Address 2:

City, State, Zip:

Phone:

Email:

Roman Shade Order Form

Line	Qty	Room Loc	Style	Width	Length	Mount	Pattern and Color	BO Liner	Front Val	Retu rns	Multi Shade	Spec Rtn Sz Box Val Only	Operation
1													
2													
3													
4													
5													
6													
7													
8													

Qty Single Channel Remote

Multi Channel Remote

Single Wall Switch

Qty Multi Wall Switch

USB Wand Motor Charger

Pro Hub

Qty Remote Motor Charger - 10' Cable

Remote Motor Charger - 16' Cable

External Lithium Ion Battery Pack

Order Notes: