



8017 Pinemont Dr. Suite# 100, Houston, Texas 77040  
 Tel. 713-686-3976 Fax. 713-686-3975  
 Email your order to us at : [Info@Expowindowfashion.com](mailto:Info@Expowindowfashion.com)

# HORIZONTAL BLINDS ORDERING FORM

PAGE OF

Account # \_\_\_\_\_  
 Account Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Fax Number: \_\_\_\_\_

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Phone \_\_\_\_\_  
 SPECIAL SHIPPING INSTRUCTIONS \_\_\_\_\_

Date \_\_\_\_\_  
 Sidemark \_\_\_\_\_  
 P.O. # \_\_\_\_\_  
 Ordered By: \_\_\_\_\_  
 Product Type \_\_\_\_\_

Line	Qty	Width	Height	Color Number	Color Name	Type of Mount <i>Circle One</i>	Tilt Position <i>Circle One</i>	Lift Position <i>Circle One</i>	Cord or Wand Tilt* <i>Circle One</i>	Brackets			Optional 2" Tape <i>Specify Color #</i>	Comments
										Extension	Hold Downs	Spacer Blocks		
						I/B O/B	L R	L R	C W				Color# _____	
						I/B O/B	L R	L R	C W				Color# _____	
						I/B O/B	L R	L R	C W				Color# _____	
						I/B O/B	L R	L R	C W				Color# _____	
						I/B O/B	L R	L R	C W				Color# _____	
						I/B O/B	L R	L R	C W				Color# _____	
						I/B O/B	L R	L R	C W				Color# _____	
						I/B O/B	L R	L R	C W				Color# _____	
						I/B O/B	L R	L R	C W				Color# _____	
						I/B O/B	L R	L R	C W				Color# _____	
						I/B O/B	L R	L R	C W				Color# _____	
						I/B O/B	L R	L R	C W				Color# _____	
						I/B O/B	L R	L R	C W				Color# _____	

Optional Instructions