**Valances** **Order Form** **Valances**

Account #_____
Company _____
Address _____
_____
Phone # _____
Fax # _____

Sidemark _____

Purchase Order # _____

Date _____
Ordered By: _____
Ship To: _____
_____
_____
_____

Bill to Credit Card on File? _____

**Fax to (866) 768-0663**
**Email:**
**Orders@dreacustomdesigns.com**

| Valances | Valances |
|---|---|
| Style: | Style: |
| Color: | Color: |
| Fabric Width: Repeat: | Fabric Width: Repeat: |
| C.O.M. Yes/No | C.O.M. Yes/No |
| Lining Fabric: | Lining Fabric: |
| Color: | Color: |
| Lining Fabric Width: Repeat: | Lining Fabric Width: Repeat: |
| C.O.M. Yes/No | C.O.M. Yes/No |
| Quantity: | Quantity: |
| Rod Face Width: | Rod Face Width: |
| Returns: | Returns: |
| Finished Width: | Finished Width: |
| Finished Length: | Finished Length: |
| # of Widths: | # of Widths: |
| Pleat Style | Pleat Style |
| Pin Setting: | Pin Setting: |
| Options: | Options: |
| | |
| | |
| | |
| | |
| | |
| | |