



ROLL-A-SHADE®
MANUFACTURING SOLAR SOLUTIONS

29885 2nd Street Unit E, Lake Elsinore, CA 92532 • 951-245-5077 • Fax: 951-245-5075

1011 Serdica Court, Mississauga, ON L5H 4H9 • 888-245-5077 • Canadian Sales Office

Custom Window Shade Order Form

Page ____ of ____

Date

Bill To:

Company:

Address:

City:

State: Zip:

Name:

Contact Phone #:

Fax #:

PO #

Ship To:

Location:

Address:

City:

State: Zip:

Contact Phone #:

**Please fax completed form to
951-245-5075**

Note: Custom made products may not be returned or cancelled.

Qty	Material & Color Name	Width	Length	Bottom Rail Color	Inside or Outside Mount	Clutch Control L or R	Regular Roll / Reverse Roll	Fascia		Special Instructions
								Y or N	Color	

I certify that I am responsible for the measurements, specifications and their accuracy. I understand any corrections or revisions requested may result in additional fees.

Responsible Party Signature: _____ **Print Name:** _____ **Title:** _____