Aluminum Horizontal Order Form

Dealer Code	
Dealer Name	
Address	
City	
Phone	

Consumer	
Address	
City	
Phone	
Ship Via	

Date	
PO	
Tag	
Dealer Sales Person	
Jackson Ref #	

Qty	Width	Length	Style 1"	Colour # and Colour	Tilter Side **R**ight **L**eft	Cord Side **R**ight **L**eft	Brackets **E**nd **P**rojection	Hold Down Brackets **N**o **Y**es	Valance **N**one **R**egular	Valance End Return Yes No	Price

Special Instructions