

Account #	P.O. #	Customer Name:	Designer:	Ordered by:
Order Date:		Confirmation requested: Y or N	<i>cmi</i> reference #	Page (s)
				___ of ___

S O L D T O	Dealer:			S H I P T O	Dealer:		
	Address:				Address:		
	City:	State:	Zip:		City:	State:	Zip:
	Tel.:	Fax:	E-Mail:		Tel.:	Fax:	E-Mail:

Information must be provided in each blank to process this order.

COLORS: (# and Name)

A = _____

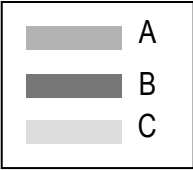
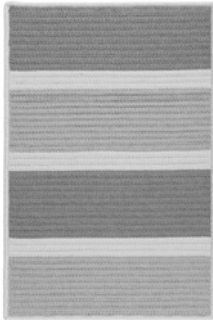
B = _____

C = _____

Serging is same color as C.

SIZE: _____

QUANTITY: _____



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SIZES:	22" x 34"	6' x 9'	3' square/octagon	2' x 5' runner	8" x 8" square trivet
	27" x 46"	8' x 10'	5' square/octagon	2' x 7' runner	15" x 15" square chair pad
	42" x 66"	9' x 12'	7' square/octagon	2' x 9' runner	8" x 28" stair tread
	5' x 7'	11' x 14'	9' square/octagon	2' x 11' runner	18" x 30" rug slice
			11' square/octagon		18" x 18" x 12" basket

– please fax order to *cmi* at 401.728.2740 –