



# VENETIAN BLINDS Order Form

Company/Shop:  
**BAILLEYS - S'MOOR**

Sales Rep:  
**SHAUN H**

Customer Name:  
**ROLLO**

Date:  
**15.09.25**

Order Reference:  
**359721**

Special Instructions

BLIND SIZE & SYSTEM										CONTROLS			OPTIONS		
Loc-ation	Width (mm)	Drop (mm)	Recess (✓)	Exact (✓)	Child Safety Installation Height (mm)	System Type / Slat Width	Slat Colour Code	RHS (✓)	LHS (✓)	REV (✓)	STD (✓)	TOP (✓)	FACE (✓)	Extras	
1 DISINAS BED	1616	1280	1/A		2500	25	4451 (A)					✓			
2															
3															
4															
5															
6															
7															
8															

NOTE: UNLESS OTHERWISE STATED ALL MEASUREMENTS WILL BE TAKEN AS RECESS AND ALL OPTIONS WILL BE DEFAULT.

FITTING NOTES: