Gosforth

**Roller Blind Order Form**

Date: 25/2/16

Contact name: LEAX

Customer Order No: 315363

Fax No.

Date Re: THURS. 3/3/16

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| No. | Fabric | Colour | W | D | Rec | Con | Fix | Scallop | Pole FH | Braid |
|---|---|---|---|---|---|---|---|---|---|---|
| 1 | ABBEY | NATURAL | 1768 | 1143 | R | R | F | 1 | 2235 | |
| 1 | | | 1768 | 1143 | R | R | F | 1 | 2235 | |

Special Instructions:-

FABRIC OFF FRONT
NO SEW BAR

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