

## Order Cover Sheet

Please use this form when sending or faxing an order. If calling in your order, please provide all the following information.

School Name: \_\_\_\_\_ Teacher Name: \_\_\_\_\_

Shipping Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

School Phone #: (\_\_\_\_) \_\_\_\_\_ School Fax #: (\_\_\_\_) \_\_\_\_\_

Home Phone #: (\_\_\_\_) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

My order is complete: \_\_\_\_\_ Yes  
\_\_\_\_\_ No – I expect my to be complete by: \_\_\_\_\_

I would like my order to school by: \_\_\_\_\_

Special Instructions: \_\_\_\_\_

All orders will be delivered or shipped within 5 days of receiving complete orders. All shipped orders are sent via UPS.

**Sew Easy Designs, 6424 Newton Avenue South, Richfield, MN, 55423**  
**(Phone) 612-861-5254 (Fax) 612-866-8674**

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