Sew Easy Designs

6424
Newton Ave.South
Richfield, MN 55423

Date:______________________

Teacher:______________________

School:______________________

Address: City:________________

State__________ZIP___________

Bill TO:________________________

City_________STATE_______Zip______

* If different from address at left

Page One of ______________

Sew Easy Designs Order Form PO #______________ Sent on:______________________

Student Initials or Name	Qty	Kit #, Mane or Description	1st Fabric Color or Pattern Choice	1st Webbing Color Choice	2nd Fabric Color or Pattern Choice	2nd Webbing Color Choice	Shoulder Pad	Shoulder Strap Option $4.50