Luxury Italian Linens
Made in Italy

ORDER FORM

PO # _____ Date ____ / ____ / ____
Page ____ of ____
OC # _____

Account Name _____ Made Expressly for _____ **PAYMENT METHOD:** _____
Order Placed by _____ Ship to _____ Charge to:
Address _____ Address _____ Credit Card # _____
City _____ State ____ Zip ____ _____ Expiration Date: ____ / ____ Security Code: ____
Phone _____ Fax _____ City _____ State ____ Zip ____ Cardholder's Name: _____
Email _____ Phone _____ Signature: _____

QTY.	PRODUCT NAME	ITEM Size	Item	FABRIC	COLOR #	Plain Hem/Hemstitch	EMBROIDERY Category	COLOR	UNIT PRICE	EXT. PRICE
OTHER DETAILS									TOTAL:	

DEA OFFICE USE			
DEA OC #	ORDER RECEIVED / /	CONFIRMATION / /	INITIAL / /
	INITIAL	INITIAL	SALES PERSON. Cathy Stemmler

Dea Luxury Linens

Customer Service:
Email: customerservice@dealuxurylinens.com

Ordering: www.deaitaly.com