



Donnita Cook
 4138 Club Course Drive
 North Charleston, SC 29420
 843-696-1956
 Email: info@sonshinequilting.com

Date Received _____
Date Promised _____

T-Shirt Quilt Order Form

CUSTOMER INFORMATION:		
Name _____	Address _____	
Home Phone _____	Other Phone _____	E-mail address _____

QUILT INFORMATION:																																					
Number of T-Shirts _____	Color preference (if any) for sashing _____																																				
Orientation _____ X _____ (# of shirts across X # of shirts down)																																					
Layout (please check one)																																					
<input type="checkbox"/>	Standard – t-shirts will all face the same direction																																				
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<input type="checkbox"/>	Coverlet – t-shirts on sides will face out (recommended for use on bed)																																				
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Free Embroidered Label (if desired)
To: _____
From: _____
Occasion: _____

# of shirts times \$16.00	\$
Sales Tax (SC residents only)	\$
Shipping and Insurance	\$ 15.00
Sub-Total	\$
Deposit (include 50% payment with t-shirts)	\$
Balance Due (before finished quilt is shipped)	\$