

PO # _____

COMPANY NAME

SHIP TO: _____

VIA: _____ (EX: UPS (If ups,your ups#))

ADDRESS

CITY, ST ZIP

PHONE

FAX

Order Form for Andrews Knitting Mills
paul@akmknit.com

651.770.4092 fax
651.770.4060

Order Date _____

Date Requested _____

Jacquard Form

	Sizes	Quantity
Name of 1 st Jacquard _____	____ X ____	_____
	____ X ____	_____
Name of 2 nd Jacquard _____	____ X ____	_____
	____ X ____	_____
Name of 3 rd Jacquard _____	____ X ____	_____
	____ X ____	_____

PATTERN: solid border 2 4 5 53 7X
BAR BORDER W/FEATHER
(circle one)

LETTER STYLE: 6F 7 7V 11 11OL 5F 3
(circle one)

Andrew Colors: _____ / _____ / _____ / _____
BORDER BACKGROUND STRIPE FEATHER COLOR of STRIPE
(if any) (if any)

LETTER COLOR LETTER OUTLINE LOGO
(if any) (if any)

NEW PATTERN or RERUN _____ / _____
(circle one) (Optional old invoice # / dated)