

Work Order

Quiltscapes | Deonn Stott | 655 East 320 North Heber City, UT 84032 | 435) 503-7412 | deonn@quiltscapesqs.com

Customer Name

Phone Number including Area Code

Shipping Address

Email Address

City State Zip

Please check the preferred method for returning your quilt

Pick-Up USPS (*default shipping method*) UPS

Fed-Ex Other _____

Shipping & Insurance Requests: _____

Customer must request and pay for any shipping insurance. Please include shipping account numbers if applicable.

Please briefly describe your quilt: _____

Quilt Top Measurements: width _____ x length _____

*Be sure to allow at least 4 to 6 extra inches of backing in both width & length to assure the securing of the quilt to the machine.

Type of Quilting Requested: _____

Thread Color: _____

Type of batting to be used: _____

Please List Any Special Instructions:

Completion Date Required: _____

I agree to allow Deonn Stott to perform quilting as described and use any photographs of the completed quilt for promotion.

Signature

Date

*** Prices Subject to Change Without Notice ***

www.quiltscapesquilting.com