



## Fabric Sample Approval Form

Customer's Name: \_\_\_\_\_

Customer's Email Address: \_\_\_\_\_

Fabric Name: \_\_\_\_\_

Durability: \_\_\_\_\_

Pattern Repeat (V & H): \_\_\_\_\_

Please send the fabric sample and this form to:

Julia & Elizabeth  
5164 Sue Drive  
Carmel, IN 46033

We will let you know if the fabric is appropriate and how much fabric will be needed.

*Thank you!*