



www.a1tablecloth.com

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Labor Form

MR #: _____

Order #: _____

Ship by Date: _____

Required Date: _____

Ordered By: _____

Phone #: _____

Ship Via: _____

Bill To: _____

Ship To: _____

(If Different From Billing Address)

Tracking #: _____

Fabric Company Name: _____

Fabric or Style: _____

Fabric Width: _____

Color Name or Number: _____

Yardage Ordered: _____

Fabric Description: _____

Rolls Expected: _____

Expected Date of Arrival at A-1: _____

What to do with remaining fabric: Return: Hold: Cut All: Call Customer:

Scraps Needed? Yes: No:

Quantity	Size	Fabric

Comments: _____
