



Virginia Quilting Seat Cushion Work Order Form

100 S Main St - P O Box 99 La Crosse, VA. 23950

Phone: 434-757-1809 Fax: 434-757-1855

Bill to Account #: _____ Ship to: _____

PO # _____ Declared _____

Sidemark: _____ Value: _____

Seat Cushions Unquilted _____ Quilted (Pattern) _____

Size: Width _____ Depth _____

Foam Size (select one): 1 2 3 4

Select one: Template Rectangle

Options: Shirred boxing _____ Buttons _____

Fabric # 1

Yardage: _____

Width/Repeat _____

Fabric Pattern/Color: _____

Fabric # 2

Yardage: _____

Width/Repeat _____

Fabric Pattern/Color: _____

Fabric # 3

Yardage: _____

Width/Repeat _____

Fabric Pattern/Color: _____

Special Instructions: