

INVOICE



Customer Name: Alex Alomrie

Company Name: CS

Customer Phone:

Customer Email: coastlineshades1@gmail.com

Customer Address:

Alex Alomrie

Dear Alex Alomrie

Great to connect with you! We're excited about the opportunity to transform your space with our custom window treatments.

Attached is your proposal with tailored product recommendations, pricing, and installation details. Take a look, and let us know if you have any questions or need any adjustments—we're here to make sure everything is just right for you.

Looking forward to bringing style and functionality to your windows. Let us know how we can help!

Kind Regards,
COASTLINE SHADES Team

2921 E Miraloma Ave Suite 2
Anaheim, CA 92806
t:714.860.4061 | f:800.816.0690
www.coastlineshades.com | info@coastlineshades.com

Coastline Shades Warranty: Coastline Shades custom treatments are warranted to be free from defects in fabrication and materials for the lifetime of the product, provided it is properly installed and remains in the possession of the original purchaser at the time of the claim. This warranty is limited to repair or replacement only, with the manufacturer retaining the right to determine the appropriate resolution for any fabrication defect. Replacements will be made according to the product's original specifications. This warranty does not cover: Normal wear and tears, Sun damage, Misuse, abuse, or improper installation/reinstallation, Damage caused by cleaning solutions or chemical treatments. Any associated costs, including installation or shipping. To file a warranty claim, please contact our Sales Services Department with a detailed description of the issue, proof of purchase, and a request for a Return Authorization. Returns will not be accepted without prior authorization. Upon verification of a fabrication or material defect, the product will be repaired and shipped back as soon as possible.

Invoice Summary

Invoice Number

INV110176

Total Amount

\$ 531.42

Amount Outstanding

\$ 529.42

* BALANCE IS DUE ON COMPLETION OF YOUR ORDER

Payment Methods



DIRECT DEPOSIT

Account Name - Experienced Installation Service dba Coastline Shades

Account No - Routing NO: 121000358 | Account NO: 325152226844

Zelle Experienced Installation Service Inc
coastlineshades1@gmail.com

Reference - Please use 'invoice number' as the bank deposit reference



CREDIT or DEBIT CARD OVER THE PHONE

Please phone credit card payments through to our office on 7148604061
Visa, Mastercard and Amex accepted.

All Credit Card transactions incur a 3% surcharge.

* LEAD TIME IS CALCULATED FROM THE DATE OF DEPOSIT AND IS SUBJECT TO CHANGE WITH FABRIC AVAILABILITY AND DURING PEAK TIMES. PLEASE NOTE THAT IF YOUR ORDER CONTAINS MULTIPLE PRODUCTS THE LONGEST LEAD TIME APPLIES.

* A minimum of 1 week is required from the date of check measure to the date of installation (excludes specialty products)

ROOM	PRODUCT	FABRIC	PRICE
	Fam	Roller Shade	Omega 5% Black/Black A2-511
Quantity: 1	Room: Fam, Mount Type: Inside Mount, Order Width: 100, Order Length: 100, Fabric: Omega 5%, Color: Black/Black A2-511, Price Band: Coastline Roller 2, Top Treatment: No, Roll Type: Regular Roll, Control Type: Clutch, Control Side: Left, Bottom Rail: Sealed Hembar Pocket, Headrail Options: No Division, Clutch Color: Black, Chain Types: Metal Chain, Metal Chain Colors: Stainless Steel		