



Tel/Fax: 407-295-5200 Orlando 321-622-8909 Melbourne  
Email: [Tracy@vuwindowtreatments.com](mailto:Tracy@vuwindowtreatments.com)  
Website: [www.VUWindowTreatments.com](http://www.VUWindowTreatments.com)

<b>Job Number</b>
401530
<b>Account Number</b>
BAYF1001
<b>Order Date</b>
<b>Sales Person</b>
Ahren
<b>Customer Reference</b>

## Invoice To

Mrs. Tami Leach,  
Bayfront Health St Petersburg, 701 6th St S  
St Petersburg, FL, 33701  
7278936178  
tamara.leach@orlandohealth.com

## Deliver To

Mrs. Tami Leach,  
Bayfront Health St Petersburg, 701 6th St S  
St Petersburg, FL, 33701  
7278936178  
tamara.leach@orlandohealth.com

#	Location	Product	Description	Qty	Net	Total
1			test email from Matrix System	1	0.00	

\*\*\*This is a custom order in which the order should be paid in full to begin production. A minimum of 50% deposit is required. The final payment will be due at installation. If the installation is not completed due to a service or missing product, you may pay 40% of the balance, and the final 10% on completion.

\*\*\*Customer to remove old window treatments or other obstacles prior to installation. Any previous arrangements must be noted on this order. All free hanging verticals do not close tight. A view into the room is possible on an angle. 2" Horizontal blinds do not close tight. Light gapping will occur. This is the nature of the blind.

\*\*\*No specific time of day can be promised for delivery. It is the policy of VU Window Treatments to deliver all items as quickly as possible. Unfortunately we are dependent upon our suppliers to help us meet anticipated delivery dates. Our promise of delivery is based upon deliveries to us, therefore subject to revision due to the above factors.

THIS IS A CUSTOM ORDER AND IS NOT SUBJECT TO CANCELLATION. Changes must be made within 3 days of deposit.

**Subtotal: \$ 0.00**

**Sales Tax:** \$ 0.00

**Total: \$ 0.00**

**Payments:** \$ 0.00

Balance Due:	\$ 0.00
--------------	---------

**Payment Type:**

**Approximate Install Date:**

Installed by: \_\_\_\_\_ Date: \_\_\_\_\_

## Remittance Advice

Customer:	Mrs. Tami Leach
Job Number:	401530
Order Date:	02-14-2022
Total Due:	\$ 0.00
Paid:	\$

**Please detach and send with payment to:**

VU Window Treatments  
301a Enterprise St  
Ocoee, Florida, 34761