



Bloom Order Form

{Saori Expressions}

Name: _____

Phone Number: _____

Email Address: _____

Mailing Address: _____

Date Ordered: _____

Select Artist (circle): Heather

Brittany

Gayle F

Gail S

Becky

Jenny

Carol

Missi

GROUP PIECE

Special notes for the artist(s): _____

(continue on back of form if more space is needed)

COST Breakdown:

(Payment due when piece is complete)

Time to complete (number of hours x \$9.50)= _____ (TBD)

Material Fee (**length** of scarf x \$5) = \$5 x _____ Feet = _____

Total Cost = Time + Materials = _____ (TBD)

****If you would like to keep it under a certain price, let us know. We will do our best to keep the total price around \$10-\$15 per foot. (ie. 4ft scarf = \$40-\$60)**

Return this form to BLOOM@TSE-Inc.org or mail to

TSE, Inc. 2027 Rice St., Roseville, MN 55113

Date Started: _____ (office use)

Date Completed: _____

Payment: _____

Order status: _____