

ORDER FORM

_____ ☐ NEW ACCOUNT ☐ RE-ORDER

S O L D T O	
S H I P T O	

ORDER DATE	CUSTOMER P.O. #	PHONE	SPECIAL INSTRUCTIONS
BUYER'S NAME		TERMS	
SHIP VIA	CANCEL DATE <input type="checkbox"/> YES <input type="checkbox"/> NO	SHIP NOW <input type="checkbox"/> SHIP AFTER _____	

	QUANTITY ORDERED	STOCK NO.	DESCRIPTION	UNIT PRICE		EXTENDED PRICE	
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
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16							
17							
18							
19							
20							
21							
22							
23							
24							
25							

THIS ORDER SUBJECT TO FACTORY APPROVAL.

TOTAL

BUYER

SALESMAN