Order Form Type in the info, print it out and mail it off!

Date:		(Office Ch	nairs Unlimited	
Ordered By				CATED SEATING	
Company:			Office Chairs 133 Post C	ak Drive	
Contact Name:			Beaver Falls, PA 15010 Phone: 800-410-7494		
Address:			Fax: 724-8 www.OfficeChairs	46-5048	
City, State, Zip:					
Phone:					
Email:					
Deliver To	Same as Above				
Company:					
Contact Name:					
Address:					
City, State, Zip:					
Phone:					
Email:					
Item	Color/Ontions	Quantity	Unit Price	Amount	
Item	Color/Options	Quantity	Unit Price	Amount	
Item	Color/Options	Quantity	Unit Price	Amount	
Item	Color/Options	Quantity	Unit Price	Amount	
Item	Color/Options	Quantity	Unit Price	Amount	
Item	Color/Options	Quantity	Unit Price	Amount	
Item	Color/Options	Quantity	Unit Price	Amount	
Item	Color/Options	Quantity	Unit Price	Amount	
Item	Color/Options	Quantity		Amount	
Payment	Color/Options	Quantity	Unit Price Sub-total	Amount	
Payment	Color/Options Ple to Office Chairs Unlimited	Quantity		Amount	
Payment		Quantity		Amount	
Payment Check payak		Quantity		Amount	
Payment Check payak Credit Card	ole to Office Chairs Unlimited American Express	Quantity	Sub-total	Amount	
Payment Check payak Credit Card Visa	ole to Office Chairs Unlimited American Express		Sub-total		
Payment Check payak Credit Card Visa MasterC	ole to Office Chairs Unlimited American Express		Sub-total Grand Total		
Payment Check payak Credit Card Visa MasterC Card Number:	ole to Office Chairs Unlimited American Express	Please Note - A	Sub-total Grand Total	non-returnable	

Cardholder Signature

Ship Date: