

ORDER FORM

When an order is placed, the customer accepts our Terms & Conditions.

① Billing Information

Company Name :																				
Contact Person :																				
Title :																				
Address { line 1 } :																				
Address { line 2 } :																				
City, State, Zip :																				
Phone :	Fax :																			
Email :																				
Method of Payment { please circle } - MC Visa Amex																				
<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td> </tr> </table>																				
Expiration { mm / yy } :		Security Code :																		
Cardholder { print name } :																				
Signature :																				

Order Date :
Your Purchase Order Number :

② Shipping Information { All orders FOB Louisville, KY }

Ship to { storefront / warehouse / building } :
Address { line 1 } :
Address { line 2 } :
City, State, Zip :
Additional Shipping Information :

③ Shipping Instruction

Requested Ship Date :
Receiving Hours { day / time } :
Do you require liftgate truck? { please circle } - No Yes { extra charges }
Additional Shipping Instruction :

Item Number	Description	Quantity	Unit Price	Total Amount
Total Order Amount : { This total order amount does not include shipping. Shipping will be added to your final invoice. }				