

Stewart

949-492-1085

retail@stewartsurfboards.com

Dealer: _____

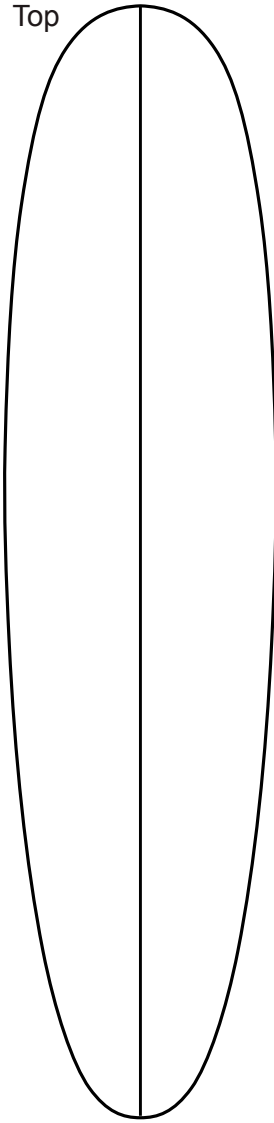
Date Ordered: _____

Board #: _____

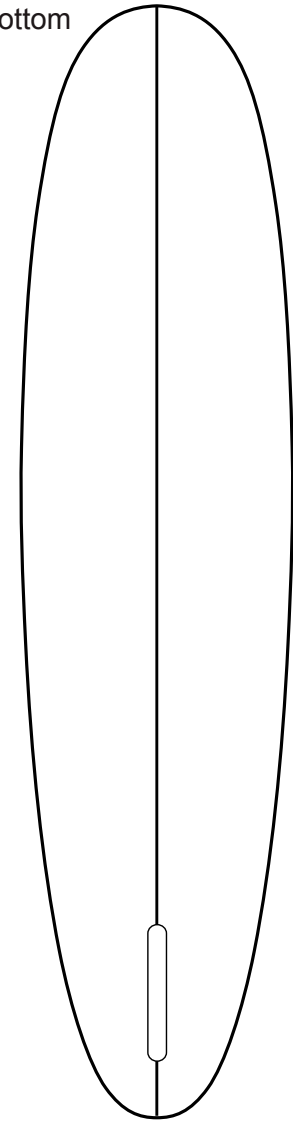
Salesman: _____

Date Due: _____

Top



Bottom



Name: _____

Phone: _____

Address: _____

City: _____

State: _____ Zip: _____

Email: _____

Age: _____ Height: _____

Ability: B I A Weight: _____

Model: _____ Stock: _____

LG: _____ WD: _____ TH: _____

E-Type Polyurethane

Glass Top: _____

Glass Bot: _____

Finish: SAND ONLY SAND GLOSS GLOSS POLISH

Side Boxes:
1 2 3 4 5

Center Box:
M L

Leash Plug: L C R DRILL BOX

Customer Authorization Signature: _____

X _____

Board #: _____

Painted

Resin Color

Clear

Comments: _____