

## Customer Order Form

**Please fill out form completely and fax back to us at 432-334-6011.**

**Bill To:**

Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, St, Zip: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Ph: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Alt. Ph: \_\_\_\_\_ Store # \_\_\_\_\_  
 Contact: \_\_\_\_\_  
 Order Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Ship To:**

Check if bill to and ship to address is the same.  
 Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, St, Zip: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Ph: \_\_\_\_\_

Qty	Item and Description	Price Each	Total

**Shipping, insurance and any applicable tax are not included unless otherwise noted.**

**Select UPS shipping method:**

Ground     3 Day Select     2nd Day     Next Day     Other \_\_\_\_\_

**Payment Method:**

Visa     Mastercard     Discover  
 Name on card: \_\_\_\_\_  
 Card # \_\_\_\_\_  
 Exp. Date: \_\_\_\_\_ V Code: \_\_\_\_\_

Have an account?     NET 30  
 PO # \_\_\_\_\_

**Order Approved By:**

\_\_\_\_\_  
 Please Print Name

\_\_\_\_\_  
 Signature

Prices may vary and are subject to change. There is a 30% restocking fee on all returns. No refunds after 30 days. Some items are nonrefundable, please check with manager. Account will not be charged until date of shipment to your facility or order is received at our office and is ready for pickup.