



Phone Order Form

Date: _____ Customer: _____

PO#: _____ Email: _____

Quote #: _____ Phone#: _____

Sales Rep: _____

Payment: Credit Card (Visa and MC only, form attached)

Payment in Advance

Terms _____

Other _____

Accounting:
Credit Card Charged

Date: _____

Initials: _____

Bill to: _____

Ship to: _____

Ship Method: _____

Quantity: _____ P/N _____ Amount: _____

Quantity: _____ P/N _____ Amount: _____

Quantity: _____ P/N _____ Amount: _____

Quality Clauses: _____