ORDER

Date:
Customer:
Phone:
Fax:
Email:
Ship Date:
Ship Via:
Terms:
Tax Exempt:

Qty	Description	Price	Total
	Thank you for your business!		
		Subtotal	
		Shipping	
		Tax	
		Total	

Tax ID:

Customer Signature: _____ Date: _____

Approved By: _____ Date: _____