

ORDER FORM

PRINT CLEARLY

DATE ____/____/____



K and B Dealer Number 96078

PH: 509-628-2517

800-965-9660

FX: 877-485-3974

janda@j-and-a.com



BILL TO

Company/Name _____

Attention To _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

SHIP TO

Company/Name _____

Complete ONLY if different from Bill To information

Attention To _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

Qty	Product Number	Name of Product	DETAILS OF SALE	Extended Price
			Selling Price <small>Each</small>	
Detail of Extra Charges, if any.			Total Extra Charges, if any	
	Description of Charge	\$ Amount	Sales Tax <input type="checkbox"/> Exempt <i>Fax exempt doc. or resale certificate</i>	
	Description of Charge	\$ Amount	Transportation Charges* (Est)	
	Description of Charge	\$ Amount	TOTAL	
	Description of Charge	\$ Amount	Deposit to Dealer	
	Description of Charge	\$ Amount	Deposit to Company, if any	

Special This is exact repeat of previous K&B order # _____

Instructions Refer to last K&B order number _____ with noted changes.

ITEM COLOR _____

IMPRINT COLOR _____

IMPRINT LOCATION _____

WEARABLES

- Fine Pt. Trim Color _____ S XL
- Med. Pt. Barrel Color _____ M XXL
- Refill Color _____ L

If product is needed for an event, please provide the in-hands date. We will confirm your event date can be met and notify you of any expedited shipping or rush charges that would be necessary.

Event Date _____

Have custom logo to be imprinted

COPY WANTED - PLEASE PRINT CLEARLY. Attach additional sheet if necessary.
WE RESERVE THE RIGHT TO RE-ARRANGE COPY FOR BEST IMPRINT

SPECIAL INSTRUCTIONS

This form is not a binding contract and does not obligate you to a purchase. The information provided will allow us to prepare a complete final order document that will be faxed or emailed to you for your approval prior to any production. Not all information needs to be provided at this time. This form can also be used for a quote request