BATHROOM MACHINERIES ORDER FORM

Date:_____ Cust. P.O.#:_____ **Get E-Mail**:_____ By:_____

Day Phone:_____ **Ship To** Phone:_____ Fax#:_____.

BILL TO:_____ **SHIP TO**:_____

SAME AS **BILL TO**

_____ _____

_____ _____

_____ _____

Signature Required? YES NO * RESIDENCE BUSINESS

RETAIL CONTRACTOR WHOLESALE

CUST ID#_____ ORDER #_____ QUOTE ONLY _____

Quantity Ordered	Item No.	Finish	Description	List Price	Total Price

UPS GROUND (48 STATES ONLY)

MERCHANDISE TOTAL _____

7.25% SALES TAX (CALIF ONLY) _____

SHIPPING CHARGES _____

TOTAL CHARGES _____

Foam	Crating	SHIP VIA:	
Up to $25	10.00	UPS	Priority
$25 to $49	14.00	Ground	1st Class
$50 to $99	20.00	3 Day	WILL CALL
$100 & up	GET QUOTE	2 Day	
		Next Day Air	
		Next Day AM	

BILL: UPS

CUSTOMER'S ACCT No:_____

Freight

METHOD OF PAYMENT: FACTORY DIRECT: Part / All CWO Ck #_____

CREDIT CARD Mastercard Discover Visa (AMEX discontinued 9/10)

Expires Code

Initial: Taken By:_____ Entered By:_____ Authorized By:_____ Reviewed By:_____

Where did you hear about us?_____Repeat Cust? Y / N

Word/FORMS/BATHROOM MACHINERIES ORDER