

Special Order Request

Date: _____

Salesrep: _____
(Signature)

Customer Information

Purchase Order Number: _____

Bill to: _____

ship to: _____

Item(s) Needed

| Qty | Unit Size | Item # | Item Description Include item size and color | Vendor *** | Cost | Selling Price |
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Special Instructions:

!!INCOMPLETE FORMS WILL BE RETURNED TO THE DISTRICT MANAGERS!!

*** Please include vendor's item number***