KRENDL MACHINE ORDER FORM

For fastest service fill out this order form and FAX to 1-419-695-9301

SOLD TO:

Name_____

Address _____

P.O. Box _____

City _____ **State** _____ **Zip** _____

Phone # _____

Fax # _____

Contact Person _____

Purchase Order # _____

SHIP TO: **(Only if different than sold to)**

Name _____

Address _____

City _____**State** _____ **Zip** _____

Shipping Instructions_____

_____

_____

PLEASE CIRCLE: **COMMON CARRIER - GROUND**

NDA - NDA SATURDAY - 2ND DAY AIR
(on orders received by 2:00 pm E.S.T)

QTY.	Part #	Description

INDICATE METHOD OF PAYMENT:

_____ Send the order COD. I understand freight charges will be added to the order total.

_____ Charge to my credit card. I understand freight charges will be added to the order total.

(Replacement parts only)

_____ VISA _____ MASTER CHARGE

_____ DISCOVER _____ AMERICAN EXPRESS

CREDIT CARD # _____ EXP. _____ CODE: _____

_____ Bill me, I have an open account. I understand freight charges will be added to the order total.

Signature required: _____

THANK YOU!! **WE APPRECIATE YOUR BUSINESS!!**

PHONE: 1-800-459-2069 **FAX: 1-419-695-9301**