HOOVER & STRONG

Order Form

PLEASE MAKE COPIES OF THIS FORM.

DATE: _____ TIME: _____ SALES REP _____

BILL TO: _____

_____

_____

_____

ORDERED BY: _____

NEW ADDRESS ☐ NEW ACCOUNT ☐ JBT RATING _____

DATE: _____ TIME: _____ SALES REP _____

SHIP TO: _____

_____

_____

_____

PHONE: _____ FAX: _____

TYPE OF BUSINESS: _____

Ship: Federal Express: ☐ 2 Day (Economy) ☐ Next Day/A.M. (Priority1) ☐ Next day/P.M. (Standard)

U.S Postal Service: ☐ Priority Mail ☐ Registered Mail ☐ Express Mail ☐ Other _____

Method of Payment: ☐ Net 30 ☐ COD ☐ Prepaid or Refining Credit (1 1/2%) ☐ MasterCard ☐ VISA

Credit Card # _____

Name on Card _____

Expiration Date _____

Special Instructions:

_____

_____

☐ Ship order complete ☐ Ok to part-ship if necessary

QTY	UNIT	KARAT COLOR	PRODUCT	DESCRIPTION (Diameter, length, width, thickness, style name, stone size, finger size, dimension)	TREATMENT
(ex:)	Each	14Y	Flat Sheet	3" X 1" X 18ga	Dead Soft
(ex:)	Each	Flat	Solitaire	SH417/S41 1ct Finger size 6	Finished