CUSTOMER ORDER FORM

21102 SR 44, EUSTIS, FL 32736
TOLL FREE: 888-812-3020
LOCAL: 352-357-3500
FAX: 352-357-2619
SALES@LINERSOURCE.COM
WWW.LINERSOURCE.COM

BILLING ADDRESS

COMPANY: _____
CONTACT: _____
ADDRESS: _____
CITY, ST., ZIP: _____
PHONE: _____
FAX: _____
EMAIL: _____

SHIPPING ADDRESS

COMPANY: _____
CONTACT: _____
ADDRESS: _____
CITY, ST., ZIP: _____
ALT. PHONE: _____

DATE OF ORDER	DELIVERY OR PICKUP	REQUESTED DELIVERY / PICKUP DATE

QTY	POT SIZE	ITEM	QTY	POT SIZE	ITEM

PLEASE MAIL OR FAX YOUR COMPLETED FORM.

QUANTITIES AND REQUESTED DATES ARE SUBJECT TO APPROVAL BY OUR PRODUCTION DEPARTMENT. YOU WILL BE CONTACTED WITH CONFIRMATION OF YOUR ORDER UPON APPROVAL.

_____ DATE

_____ AUTHORIZED BY

YOUR SOURCE FOR QUALITY ORNAMENTAL LINERS AND FINISHED CONTAINER STOCK