Fax Order Form

"The Professionals Choice"®

Rifle & Pistol Cleaning Patches

CUSTOMER INFORMATION:

Name:_____

Company:_____

Address:_____

City:_____ State:____ Zip:_____

Coutry:_____

Phone:_____

SHIP TO:

Name:_____

Company:_____

Address:_____

City:_____ State:____ Zip:_____

Coutry:_____ Phone:_____

ITEM NUMBER	DESCRIPTION	AMOUNT	PRICE	TOTAL
			SUB-TOTAL	
			DISCOUNT	
			SHIPPING	
			GRAND TOTAL	

❑ **CREDIT CARD:** MasterCard VISA AMEX DISCOVER eCHECK ☐ **Check here if you receive Net-30 Terms.**

Card #:_____

Experation Date:_____ Amount:_____

❑ **E-CHECK:**

Date:_____ Amount:_____

ABA Rounting #:_____

Bank Name:_____

Name on Account:_____

Bank Account Type:_____

Signature:_____

If requesting credit please call so we may fax, mail or e-mail you an application.

Shipping cost will be applied after order is prepared for shipping.

2615 Fruitland Ave. • Vernon, CA 90058 • Office: (323) 589-2775 • Fax: (323) 589-3511 • www.theprofessionalschoice.net • www.gunpatches.com