

# SUNSET BAMBOO WHOLESALE PROGRAM

## ORDER FORM

COMPANY \_\_\_\_\_

CONTACT \_\_\_\_\_

PHONE \_\_\_\_\_

FAX \_\_\_\_\_

EMAIL \_\_\_\_\_

PO or JOB NAME \_\_\_\_\_

PURCHASE/ORDER FOR RESALE?

*Please note: if you check "no," sales tax will be added.*

YES  NO

PROCESS AS AN ORDER

REQUEST FOR QUOTE/PRO-FORMA INVOICE

PAYMENT INFORMATION:

CREDIT CARD  CHECK  MONEY ORDER

to pay by credit card, An authorization form is required

BILL TO:

NAME \_\_\_\_\_

PHONE \_\_\_\_\_

MOBILE PHONE \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE/PROVINCE \_\_\_\_\_

ZIP/POSTAL CODE \_\_\_\_\_

SHIP TO:

NAME \_\_\_\_\_

PHONE \_\_\_\_\_

MOBILE PHONE \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE/PROVINCE \_\_\_\_\_

ZIP/POSTAL CODE \_\_\_\_\_

WHOLESALE PRODUCT ORDER:

PRODUCT DESCRIPTION	CODE	QUANTITY	PRICE	TOTAL
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

THIS BOX FOR ISLAND THATCH, INC. USE ONLY

DATE ORDER RECEIVED:

CONFIRMED VIA:  PHONE  EMAIL