

Sanford Distributing Fax Order Form

Date	PO Number	Shipper Preference	
Ship To			
Company		Contact Name	
Address		Phone Number	
City		Fax Number	
State/Provir	ce Zip/Postal Code		

FAX TO: (910) 295-4540

We will calculate the shipping and prepare your order and will contact you for payment. Print a copy for your records

Part No.	Description	Quantity	Unit Price	Amount	
Date Received	Internal Use Only Amount Received	Total			
Dute necewed	Anounneceived	NC State Tax @			
		Sales Tax for NC	Sales Tax for NC residents ONLY		
	Thank You!	We will calculate shipping & call you with total			
	We appreciate your business.		Grand Total		

Sanford Distributing Co., Inc.109-D Mid South Drive, West End, NC 27376 Phone #: (910) 295-3810 & Fax #: (910) 295-4540 http://www.sanford-epoxy.com/