ORDER FORM



Call Toll-Free 1-800-552-9231 In Michigan Call 616-241-3922 • Fax Orders to 616-452-1255 8:00 a.m. - 5:00 p.m. Eastern Standard Time Monday through Friday Down, Inc. 635 Evergreen SE Grand Rapids, MI 49507

DATE:	

BILL TO:				SHIP TO (if different than BILL TO):					
Company			Company						
Attention			Attention						
Address			Address						
City/State/Zip			City/State/Zip						
Phone (include area code)			Phone (include area code)						
Fax (include area code)				Fax (include area code)					
E-mail Address			E-mail Address						
Purchase Order No.:				Printed Name of Person Placing Order:					
Date: Phone (include area code)				Signature of Person Placing Order:					
Quantity	Style#	Color	Size	Description			Unit Price	Total	
Please provide business resale number:			O.B. Grand Rapids, MI	In order t Please b	ATTENTION FIRST-TIME BUYERS In order to expedite your order promptly, Please be sure you have completed and returned the New Account Form via				
		MENT: (Reme	ember to	include credit ca	ard information)		r mail to our bu See above for	siness office.	
		,	(please	fill out the enclos	sed New Account Infor	mation Forn	n on the reve	rse side)	
				ey Order Only)					
☐ Please	e charge n	ny: 🗖 Visa	☐ Maste	erCard 🗖 Ame	rican Express Issuing	Bank:	(For Visa ar	nd MasterCard)	
NameCa					_ Cardholder Signatuı	Cardholder Signature:			
Account No:			Evn Date:	Card Va	Verification Code:				