FAX 1-800-248-2696

FAX ORDER FORM

LIEBERMAN CO., INC.

For faster service copy this form and fax your orders in.

PLEASE PRINT

DATE: _____

CUSTOMER: _____ CUSTOMER#: _____

BILL TO: _____ SHIP TO: _____

ADDRESS: _____ ADDRESS: _____

CITY: _____ CITY: _____ STATE: ____ ZIP: _____

STATE/ZIP: _____ PHONE: _____ FAX: _____

ORDERED BY: _____ PO# IF REQUIRED: _____

Credit Cards Accepted: ❑Visa ❑Mastercard ❑American Express ❑Discover

Name: _____ Signature: _____

Card Number: _____ 3 Digit CV Code: _____ Exp. Date: _____

PLEASE SHIP REGULAR U.P.S. ❑

EXTRA CHARGES FOR: NEXT DAY AIR ❑ 2ND DAY AIR ❑ 3RD DAY AIR ❑

IMPORTANT! YOUR CUSTOMER # IS YOUR ACCOUNT # - Please have your account # ready before you place your telephone order. This will help our warehouse personnel in processing your oder. THANK YOU!

QTY	CATALOG#	DESCRIPTION / COLOR /SIZE	UNIT PRICE	TOTALAMOUNT