



RUSSELL-HAMPTON

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PLEASE UPDATE OUR ORGANIZATION'S BILLING ADDRESS WITH THE ABOVE "BILL TO" INFORMATION. DATE:

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*By providing your email address you will receive an automatic order acknowledgment when your order has been entered into our computer system AND another automatic acknowledgment when your order has been shipped. We will ONLY use your email address if we have questions about this order.

I am authorized to order for my organization. Orders without signatures cannot be processed.

This is a personal order. My Credit Card Number is: VISA MasterCard Discover American Express CID# Expiration Date

Date Needed**: I AUTHORIZE EXPEDITED SHIPPING TO MEET THIS DATE.

**This date will be met if at all possible, but cannot be guaranteed.

Table with 5 columns: QUANTITY, ITEM NUMBER, DESCRIPTION, UNIT PRICE, TOTALS. Multiple empty rows for data entry.