

PASSION OF QUALITY



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Email: info@myhospitalitysupplies.com URL: www.myhospitalitysupplies.com

SHIP TO:

PROPERTY NAME

PROPERTY ADDRESS

CITY STATE ZIP CODE

CONTACT PERSON TITLE

() ()

AREA CODE/TELEPHONE NUMBER AREA CODE/FAX NUMBER

BILL TO:

PROPERTY NAME

PROPERTY ADDRESS

CITY STATE ZIP CODE

CONTACT PERSON TITLE

() ()

AREA CODE/TELEPHONE NUMBER AREA CODE/FAX NUMBER

DATE	SHIP VIA	F.O.B. ORIGIN	TERMS
CUSTOMER/PURCHASE ORDER NO.	ORDER DATE	SALESPERSON	

SKU NUMBER	QUANTITY	P.O.#	DESCRIPTION	UNIT PRICE	EXTENDED PRICE

SUBTOTAL	
SHIPPING CHARGES QUOTED	
SALES TAX AT 4.00% If shipping in GA	
TOTAL AMOUNT DUE	

DID YOU VERIFY?

- ☐ Size
- ☐ Color
- ☐ Quantity
- ☐ Imprint
- ☐ Ship To/Bill To
- ☐ Payment Method

CREDIT CARD:

☐ VISA ☐ MASTERCARD ☐ DISCOVER ☐ AMEX

EXPIRATION DATE: _____ / _____