

# LEEJOFA CARPET

SHOWROOM/ROAD REP:		BILL TO:	
CUSTOMER SERVICE REP:			
ORDER DATE:			
ACCOUNT#:			
SITE#:		PHONE:	PHONE:
CUSTOMER PO#:		SPECIAL NOTES:	
SIDEMARK:			

QTY	CARPET SKU/PRODUCT NAME	COLOR	SIZE	PRICE	SUBTOTAL

SUBTOTAL:		
IN HOME DELIVERY - WORKROOM/DELIVERY NAME:	IN HOME CHARGE:	
	FREIGHT:	
TOTAL (PLUS TAX IF APPLICABLE):		
	DEPOSIT:	
	BALANCE:	

\*\*\*PRICE QUOTES WILL BE HONORED FOR 30 DAYS\*\*\*

### PAYMENT INFORMATION

CREDIT CARD TYPE:		NAME ON CARD:			
CREDIT CARD#:		SECURITY CODE:	EXP DATE:	BILLING ZIP CODE:	
PAYMENT VIA CHECK (COMPLETE DETAILS)    BANK NAME:					
BANK ACCOUNT#		ROUTING#:			
CHECK#		CHECK TOTAL:			

### CUSTOMER SIGNATURE APPROVAL & AUTHORIZATION

I authorize the verification of the information provided & permission to charge to my credit/debit card for agreed upon purchases/payments. I understand that my full credit card information is not stored by kravet inc. Or its subsidiaries but is tokenized to eliminate risk of a security breach.

Notice to U.S. Customer about electronic check conversion: when you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution. **DO NOT MAIL YOUR PHYSICAL CHECK TO US**

SIGNATURE:		DATE:	
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