PHONE SALES ORDER FORM

[COMPANY NAME]
[STREET ADDRESS]
[CITY], [STATE/PROVINCE], [ZIP/POSTAL CODE]
[PHONE NUMBER WITH AREA CODE]

Customer Name:		Customer No.:
		Terms:
Ship To:		Salesperson:
		Ship Week Of:

Order No.:	Delivery Via:	Routing:

Item	Quantity	Description	Unit Price	Total
			Grand Total	

Special Instructions:	Date:	Approval Signature:
	Purchaser:	
	Purchaser Title:	

ORDER FORM

[COMPANY NAME]
[STREET ADDRESS]
[CITY], [STATE/PROVINCE] [ZIP/POSTAL CODE]
[PHONE NUMBER WITH AREA CODE]

Order Number:	
Date:	
Salesperson:	

Sold To:	Ship To:
Client's Phone No.:	Ship By:

Quantity	Item/Description	Price per Item	Subtotal
			$
			$
			$
			$
			$
			$
			$
			$
			$
			$
			$
			$

Sales Tax:	$
Total:	$
Shipping Charge:	$
Amount Due	**$**

THIS FORMS PACKAGE HAS 7 DIFFERENT FORMS.