PURCHASE ORDER FORM

SALES REP: _____

BUSINESS NAME: _____ DATE: _____

ACCOUNT #: _____ CONTACT NAME: _____

SHIPPING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

TEL #: _____ E-MAIL: _____

PLEASE, PRINT THIS FORM, FILL OUT AND SEND IT TO OUR OFFICE BY FAX (718-326-8765) OR BY E-MAIL TO YOUR SALES REPRESENTATIVE.

ITEM #	DESCRIPTION	QUANTITY

☐ Add me to your VIP mailing list to be one of the first customers to receive information about new items and promotions.

R.R. LALENA CORPORATION

59-26 55th DRIVE, MASPETH, NY 11378 USA | TOLL FREE: 1.800.R.LALENA

TEL: 718.326.9788 | FAX: 718.326.8765 | www.RRLALENA.com

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PLEASE, SEND FILLED-OUT FORM TO OUR OFFICE BY FAX (718-326-8765) OR BY E-MAIL TO YOUR SALES REPRESENTATIVE.

THANK YOU FOR YOUR BUSINESS, TRUST AND CONFIDENCE!

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