

PACKING LIST

Shipment for:

NAME _____ DATE _____

ADDRESS _____

CITY _____ STATE _____ Zip _____

<u>SPECIMEN</u> <u>DESCRIPTION</u>	<u>JAW</u> <u>CLEANED</u>	<u>TAG</u> <u>NUMBER</u>	<u>CUSTOMER</u> <u>NAME</u>	<u>PRICE</u> <u>EACH</u>
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YES NO

YES NO

YES NO

YES NO

YES NO

YES NO

YES NO

YES NO

YES NO

PHONE _____

METHOD OF PAYMENT VISA MASTERCARD CHECK
CARD NUMBER

EXPIRES _____

SIGNATURE _____ NEW CUSTOMER

PRINT NAME _____

NAME ON CARD _____

Jerry's Wholesale Skull Cleaning

Jerry Coppus

N4157 Murphy Rd.

Kaukauna, Wi. 54130

(920)-687-1597

