ARLENCO DISTRIBUTION, INC.

2965 S. 2000 W.
REXBURG, ID 83440
PHONE: 208-356-6677, FAX: 208-356-0611

YOUR PURCHASE ORDER # _____ DATE_____

Bill to:

Company Name _____
Address_____
City, State, Zip_____
Phone #_____

Ship to:

Company Name_____
Address_____
City, State, Zip_____
Phone #_____

BUYER_____ SHIP VIA_____

QUANTITY	UNIT	MANUF PART #	DESCRIPTION	PRICE	EXTENSION

Upon placement/acceptance of this purchase order, or shipment from the manufacturer of above items, I, _____, authorize Arlenco Distribution to charge the credit card on file with Arlenco ending with the last 4 digits: ___ ___ ___ ___ for the above shipped items and applicable freight.

Signature of Buyer: _____ Date: _____