1330 Mercy Drive N.W. • Canton, Ohio 44708
PH: 330-489-1422 • FAX: 330-489-1024

Uniform Order Blank

Employer: _____

Address: _____ _____

City: _____ State: _____ Zip Code: _____

Phone: Home _____ Work _____

Name: _____ Dept: _____

Invoice# _____

Date _____

F-3602-NS 850 0700

Cat.#	Description	Color	XS	S	M	L	XL	2X	3X	4X	5X	Rec'd	Order	B.O.	Qty.	Unit Price	Extended Price
	TOTAL:																

Sub Total _____

Sales Tax _____

TOTAL _____

Paid by: ☐ Cash Ck#_____ ☐ M.C. / Visa / Discover ☐ Payroll Deduction Signature: _____ Date: _____ 20____