Date_____

FOR OFFICE USE ONLY
CUSTOMER NO. _____
CREDIT CODE _____

SOLD TO:
NAME _____
_____
CITY _____ STATE _____ ZIP _____
PHONE _____

SHIP TO:
NAME _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____
PHONE _____

CUSTOMER NO.	REQUEST SHIP DATE	SHIPPING INSTRUCTIONS	SALES NO.	TERMS

QUANTITY	MODEL#	COVER COLOR	DESCRIPTION	PRICE EA.	TOTAL

SPECIAL INSTRUCTIONS NOT VALID WITHOUT CUSTOMER SIGNATURE

_____

PURCHASER

Sealy Seating System™ • 755 Raco Drive, Suite A • Lawrenceville, Georgia 30046
770-277-2577 • Fax 770-277-2578 • www.sealyseating.com

Manufactured by The ChairWorks Manufacturing Group Limited, a licensee of Sealy Technology LLC.

© ChairWorks® 0809