

BATES LEATHERS
1663 EAST 28th STREET • SIGNAL HILL, CA 90755
tel: [562] 426-8668 • fax: [562] 426-4001



STANDARD ORDER FORM

OFFICE USE ONLY

A. PLEASE PRINT SHIPPING ADDRESS (IF DIFFERENT FROM BILLING)

Name: _____
Address: _____
City: _____ State: _____ ZIP: _____
Daytime phone number: [____] ____ - _____ Email address: _____

B. ORDER DESCRIPTION

ITEM	COLOR(S)	SIZE	QTY	PRICE	TOTAL

I approve this order. SIGNATURE: _____ DATE: ____/____/____

CIRCLE ONE: CHECK OR MONEY ORDER

C. PLEASE PRINT BILLING AND PAYMENT METHOD



Name: _____
Address: _____ Daytime phone : [____] ____ - _____
City: _____ State: _____ ZIP: _____
Card number: _____ Exp.Date: ____/____/____ CVC Code: _____

CARDHOLDER SIGNATURE: _____

BY SIGNING THIS, CUSTOMER GIVES PERMISSION TO BATES LEATHERS TO USE THE ABOVE CREDIT CARD FOR PURCHASES MADE IN REGARDS TO THIS ORDER. CUSTOMER ALSO AGREES THERE WILL BE NO REFUNDS ON CUSTOM MADE ITEMS OF ANY KIND.

