

	1	2	3	4	5	8	RI Order No.
	Jordan	Steriflow	Lowflow	Hex	Bestobell	Marwin	
3170 Wasson Road, Cincinnati OH 45209 Phone:(513)533-5600 Fax:(513)871-0105							

Customer Contact:	Phone:	Date:	RI Sales Corr.
	FAX:		
	e Mail:		

Requested Ship Date:	Discounts Used:	Sales/Commission Credit (completed by Richards Ind.)			
	_____% ____%		Rep No.	Sales %	Comm %
Shipping Instructions:				Y	N
	Taxable?	1			
	Yes No	2			
Purchase Order No.	TAX ID:	3			

B I L L T O	Customer No.	S H I P T O	
	Name:		Name:
	Address:		Address:

Quantity	Item No./ Product Designator/ Tag No.	Price Each	Extended (Net)
	Item #: Special Instructions/Tag #	List: Net:	
	Item #: Special Instructions/Tag #	List: Net:	
	Item #: Special Instructions/Tag #	List: Net:	
	Item #: Special Instructions/Tag #	List: Net:	

Additional Instructions:	Net Order Value:
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Order Written By:
Phone: